

**FEC
FORM 3****REPORT OF RECEIPTS
AND DISBURSEMENTS**

For An Authorized Committee

Office Use Only

1. NAME OF
COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type
over the lines.

12FE4M5

LYNCH FOR CONGRESS 16

ADDRESS (number and street)

17477 CHILLICOTHE ROAD

Check if different
than previously
reported. (ACC)

CHAGRIN FALLS

OH

44023

2. FEC IDENTIFICATION NUMBER ▼

C

C00580621

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

3. IS THIS
REPORTNEW
(N)

OR

AMENDED
(A)

OH

14

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:



April 15 Quarterly Report (Q1)



July 15 Quarterly Report (Q2)



October 15 Quarterly Report (Q3)



January 31 Year-End Report (YE)



Termination Report (TER)

(b) 12-Day **PRE**-Election Report for the:

Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12S)

Election on

M M / D D / Y Y Y Y
03 / 15 / 2016in the
State of

OH

(c) 30-Day **POST**-Election Report for the:

General (30G)



Runoff (30R)



Special (30S)

Election on

M M / D D / Y Y Y Y

in the
State of

5. Covering Period

M M / D D / Y Y Y Y
01 / 01 / 2016

through

M M / D D / Y Y Y Y
02 / 24 / 2016

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Karen Quay

Signature of Treasurer

Karen Quay

[Electronically Filed]

Date

M M / D D / Y Y Y Y
03 / 03 / 2016

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office
Use
Only**FEC FORM 3**
(Revised 02/2003)

SUMMARY PAGE

of Receipts and Disbursements

FEC Form 3 (Revised 02/2003)

Write or Type Committee Name

LYNCH FOR CONGRESS 16

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
0	1		0	1		2	0	1	6

To:

M	M	/	D	D	/	Y	Y	Y	Y
0	2		2	4		2	0	1	6

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	30220.00	113662.00
(b) Total Contribution Refunds (from Line 20(d))	0.00	3700.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))	30220.00	109962.00
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	37809.01	154257.85
(b) Total Offsets to Operating Expenditures (from Line 14)	0.00	1441.71
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))	37809.01	152816.14
8. Cash on Hand at Close of Reporting Period (from Line 27)	13563.13	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	419.50	

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE of Receipts

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FEC Form 3 (Revised 12/2003)

Write or Type Committee Name

LYNCH FOR CONGRESS 16

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
0	1		0	1		2	0	1	6

To:

M	M	/	D	D	/	Y	Y	Y	Y
0	2		2	4		2	0	1	6

I. RECEIPTS
COLUMN A
Total This Period

COLUMN B
Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:**(a) Individuals/Persons Other Than Political Committees****(i) Itemized (use Schedule A).....**

30220.00

109312.00

(ii) Unitemized.....

0.00

50.00

(iii) TOTAL of contributions from individuals ▶

30220.00

109362.00

(b) Political Party Committees.....

0.00

0.00

(c) Other Political Committees (such as PACs).....

0.00

2500.00

(d) The Candidate.....

0.00

1800.00

(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..

30220.00

113662.00

12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES

0.00

55997.77

13. LOANS:**(a) Made or Guaranteed by the Candidate.....**

200.00

419.50

(b) All Other Loans.....

0.00

0.00

(c) TOTAL LOANS (add Lines 13(a) and (b)).....

200.00

419.50

14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)

0.00

1441.71

15. OTHER RECEIPTS (Dividends, Interest, etc.)

0.00

0.00

16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶

30420.00

171520.98

DETAILED SUMMARY PAGE of Disbursements

FEC Form 3 (Revised 02/2003)

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II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	37809.01	154257.85
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	0.00	3700.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	3700.00
21. OTHER DISBURSEMENTS	0.00	0.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	37809.01	157957.85

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	20952.14
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	30420.00
25. SUBTOTAL (add Line 23 and Line 24).....	51372.14
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	37809.01
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	13563.13

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 5 OF 92

☒ 11a 12 ☐ 11b 13a ☐ 11c 13b ☐ 11d 14 ☐ 15

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
LYNCH FOR CONGRESS 16

A. Full Name (Last, First, Middle Initial) rachelle adams			Date of Receipt M M / D D / Y Y Y Y 02 / 12 / 2016		
Mailing Address 34541 jewell Ln			Transaction ID : SA11AI.5789		
City earlham	State IA	Zip Code 50072	Amount of Each Receipt this Period _____ 25.00		
FEC ID number of contributing federal political committee. C _____		<input type="checkbox"/> Memo Item			
Name of Employer FMH		Occupation Underwriter			
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date _____ 25.00			
B. Full Name (Last, First, Middle Initial) SANDRA AGARD			Date of Receipt M M / D D / Y Y Y Y 01 / 29 / 2016		
Mailing Address 4085 KIRTLAND RD.			Transaction ID : SA11AI.5574		
City WILLOUGHBY	State OH	Zip Code 44094	Amount of Each Receipt this Period _____ 25.00		
FEC ID number of contributing federal political committee. C _____		<input type="checkbox"/> Memo Item			
Name of Employer Retired		Occupation Retired			
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date _____ 25.00			
C. Full Name (Last, First, Middle Initial) SANDRA AGARD			Date of Receipt M M / D D / Y Y Y Y 02 / 16 / 2016		
Mailing Address 4085 KIRTLAND RD.			Transaction ID : SA11AI.5652		
City WILLOUGHBY	State OH	Zip Code 44094	Amount of Each Receipt this Period _____ 50.00		
FEC ID number of contributing federal political committee. C _____		<input type="checkbox"/> Memo Item			
Name of Employer Retired		Occupation Retired			
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date _____ 75.00			
SUBTOTAL of Receipts This Page (optional).....			_____ 100.00		
TOTAL This Period (last page this line number only).....			_____		

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

LYNCH FOR CONGRESS 16

Full Name (Last, First, Middle Initial)

A. Cynthia Allman

Mailing Address 22800 Rockside Rd

City

Bedford

State

OH

Zip Code

44146

FEC ID number of contributing
federal political committee.

C

Name of Employer

Lab Corp

Occupation

Service Rep

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

25.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		03		2016

Transaction ID : SA11AI.5599

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Mikhail Alterman

Mailing Address 3148 Richmond Rd

City

Beachwood

State

OH

Zip Code

44122

FEC ID number of contributing
federal political committee.

C

Name of Employer

Best Efforts

Occupation

Best Efforts

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

100.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		10		2016

Transaction ID : SA11AI.5630

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Dr. Benito Alvarez

Mailing Address 8911 Wilson Mills Rd.

City

Chesterland

State

OH

Zip Code

44026

FEC ID number of contributing
federal political committee.

C

Name of Employer

Akron General

Occupation

Physician

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

100.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		09		2016

Transaction ID : SA11AI.5758

Amount of Each Receipt this Period

100.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional).....**TOTAL** This Period (last page this line number only).....

225.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a 12 ☐ 11b 13a ☐ 11c 13b ☐ 11d 14 ☐ 15

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NAME OF COMMITTEE (In Full)
LYNCH FOR CONGRESS 16

A. Full Name (Last, First, Middle Initial) Roland Arnold			Date of Receipt M M / D D / Y Y Y Y 01 / 29 / 2016		
Mailing Address 3365 Ingleside Rd			Transaction ID : SA11AI.5570		
City	State	Zip Code	Amount of Each Receipt this Period 100.00		
Shaker Heights	OH	44122	<input type="checkbox"/> Memo Item		
FEC ID number of contributing federal political committee.		C			
Name of Employer Best Efforts		Occupation Best Efforts			
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 100.00			
B. Full Name (Last, First, Middle Initial) Frank Awender			Date of Receipt M M / D D / Y Y Y Y 02 / 16 / 2016		
Mailing Address 11369 Gordon Dr			Transaction ID : SA11AI.5651		
City	State	Zip Code	Amount of Each Receipt this Period 100.00		
Parma	OH	44130	<input type="checkbox"/> Memo Item		
FEC ID number of contributing federal political committee.		C			
Name of Employer Retired		Occupation Retired			
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 300.00			
C. Full Name (Last, First, Middle Initial) Robert Barsic			Date of Receipt M M / D D / Y Y Y Y 01 / 04 / 2016		
Mailing Address 7985 Greenridge Ct			Transaction ID : SA11AI.5522		
City	State	Zip Code	Amount of Each Receipt this Period 1000.00		
Mentor	OH	44060	<input type="checkbox"/> Memo Item		
FEC ID number of contributing federal political committee.		C			
Name of Employer Best Efforts		Occupation Best Efforts			
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 1000.00			
SUBTOTAL of Receipts This Page (optional).....			1200.00		
TOTAL This Period (last page this line number only).....					

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

LYNCH FOR CONGRESS 16

Full Name (Last, First, Middle Initial)

A. Andrew Baumann

Mailing Address 4417 Galaxy Dr

City	State	Zip Code
Stow	OH	44224

FEC ID number of contributing federal political committee.

C

Name of Employer
Best EffortsOccupation
Best Efforts

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

100.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		23		2016

Transaction ID : SA11AI.5671

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Eileen Baur

Mailing Address 419 Audrey

City	State	Zip Code
Richmond Hts	OH	44143

FEC ID number of contributing federal political committee.

C

Name of Employer
Self EmployedOccupation
Realtor

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

700.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		08		2016

Transaction ID : SA11AI.5614

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. BRIAN BEAUMONT

Mailing Address 184 TELLING DRIVE

City	State	Zip Code
GENEVA	OH	44041

FEC ID number of contributing federal political committee.

C

Name of Employer
Best EffortsOccupation
Best Efforts

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

200.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01		15		2016

Transaction ID : SA11AI.5542

Amount of Each Receipt this Period

200.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

350.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 9 OF 92
 (check only one)
☒ 11a 12 ☐ 11b 13a ☐ 11c 13b ☐ 11d 14 ☐ 15

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NAME OF COMMITTEE (In Full)
LYNCH FOR CONGRESS 16

A. Full Name (Last, First, Middle Initial) Bruce Bechhold		Date of Receipt M M / D D / Y Y Y Y 02 / 11 / 2016	
Mailing Address 254 BEL St		Transaction ID : SA11AI.5778	
City Chagrin Falls	State OH	Zip Code 44022	Amount of Each Receipt this Period _____ 50.00
FEC ID number of contributing federal political committee. C _____		<input type="checkbox"/> Memo Item	
Name of Employer Best Efforts	Occupation Best Efforts		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 50.00		
B. Full Name (Last, First, Middle Initial) Clare Becker		Date of Receipt M M / D D / Y Y Y Y 01 / 25 / 2016	
Mailing Address 8860 Morgans Run		Transaction ID : SA11AI.5566	
City North Olmsted	State OH	Zip Code 44138	Amount of Each Receipt this Period _____ 250.00
FEC ID number of contributing federal political committee. C _____		<input type="checkbox"/> Memo Item	
Name of Employer Retired	Occupation Retired		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 750.00		
C. Full Name (Last, First, Middle Initial) Clare Becker		Date of Receipt M M / D D / Y Y Y Y 02 / 12 / 2016	
Mailing Address 8860 Morgans Run		Transaction ID : SA11AI.5640	
City North Olmsted	State OH	Zip Code 44138	Amount of Each Receipt this Period _____ 50.00
FEC ID number of contributing federal political committee. C _____		<input type="checkbox"/> Memo Item	
Name of Employer Retired	Occupation Retired		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 800.00		
SUBTOTAL of Receipts This Page (optional).....		_____ 350.00	
TOTAL This Period (last page this line number only).....		_____	

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

LYNCH FOR CONGRESS 16

Full Name (Last, First, Middle Initial)

A. Steve Berecek

Mailing Address 11416 Windham Parkman Rd

City	State	Zip Code
Garrettsville	OH	44231

FEC ID number of contributing
federal political committee.

C

Name of Employer
ChryslerOccupation
Best Efforts

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

25.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
02		06		2016

Transaction ID : SA11AI.5744

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. DEBRA BLAKE

Mailing Address 7793 HANKEE RD

City	State	Zip Code
GARRETTSVILLE	OH	44231

FEC ID number of contributing
federal political committee.

C

Name of Employer
RetiredOccupation
Retired

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

20.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
01		29		2016

Transaction ID : SA11AI.5573

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. CAREY BROCKMAN

Mailing Address 17140 VALLEY RD

City	State	Zip Code
CHAGRIN FALLS	OH	44023

FEC ID number of contributing
federal political committee.

C

Name of Employer
MCLEAN COMPANYOccupation
SALES

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
01		11		2016

Transaction ID : SA11AI.5538

Amount of Each Receipt this Period

1500.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional).....**TOTAL** This Period (last page this line number only).....

1535.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

LYNCH FOR CONGRESS 16

Full Name (Last, First, Middle Initial)

A. John Bruening

Mailing Address 5142 Parks West Rd

City

Middlefield

State

OH

Zip Code

44062

FEC ID number of contributing
federal political committee.

C

Name of Employer

Geauga Vision

Occupation

Optician

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

40.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		05		2016

Transaction ID : SA11AI.5520

Amount of Each Receipt this Period

40.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. James Bucks

Mailing Address 580 Eggleston Rd

City

Aurora

State

OH

Zip Code

44202

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

35.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01		26		2016

Transaction ID : SA11AI.5705

Amount of Each Receipt this Period

35.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. James Bucks

Mailing Address 580 Eggleston Rd

City

Aurora

State

OH

Zip Code

44202

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

60.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		23		2016

Transaction ID : SA11AI.5822

Amount of Each Receipt this Period

25.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional).....**TOTAL** This Period (last page this line number only).....

100.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a 12 ☐ 11b 13a ☐ 11c 13b ☐ 11d 14 ☐ 15

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NAME OF COMMITTEE (In Full)
LYNCH FOR CONGRESS 16

A. Full Name (Last, First, Middle Initial)
Gary Burden

Mailing Address 10485 State Route 700

City Hiram	State OH	Zip Code 44234
---------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Best Efforts	Occupation Best Efforts
----------------------------------	----------------------------

Receipt For: 2016
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
150.00

Date of Receipt

M M / D D / Y Y Y Y
02 / 23 / 2016

Transaction ID : SA11AI.5673

Amount of Each Receipt this Period

150.00

☐ Memo Item

B. Full Name (Last, First, Middle Initial)
Donald Byrnes

Mailing Address 18578 Haskins Rd

City Chagrin Falls	State OH	Zip Code 44023
-----------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Best Efforts	Occupation Best Efforts
----------------------------------	----------------------------

Receipt For: 2016
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
100.00

Date of Receipt

M M / D D / Y Y Y Y
02 / 08 / 2016

Transaction ID : SA11AI.5616

Amount of Each Receipt this Period

100.00

☐ Memo Item

C. Full Name (Last, First, Middle Initial)
John Campbell

Mailing Address 134 paradise Blvd

City Madison	State OH	Zip Code 44057
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired	Occupation Disabled veteran
-----------------------------	--------------------------------

Receipt For: 2016
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
25.00

Date of Receipt

M M / D D / Y Y Y Y
02 / 16 / 2016

Transaction ID : SA11AI.5800

Amount of Each Receipt this Period

25.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

275.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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NAME OF COMMITTEE (In Full)
LYNCH FOR CONGRESS 16

A. Full Name (Last, First, Middle Initial) Joyce Caron			Date of Receipt M M / D D / Y Y Y Y Y Y 01 / 25 / 2016		
Mailing Address 85 Parkview Dr			Transaction ID : SA11AI.5561		
City Aurora	State OH	Zip Code 44202	Amount of Each Receipt this Period 25.00		
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item		
Name of Employer Best Efforts		Occupation Best Efforts			
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 25.00			
B. Full Name (Last, First, Middle Initial) Anonymous Cash			Date of Receipt M M / D D / Y Y Y Y Y Y 01 / 15 / 2016		
Mailing Address Unknown			Transaction ID : SA11AI.5829		
City Unknown	State OH	Zip Code 44023	Amount of Each Receipt this Period 9.00		
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item		
Name of Employer Unknown		Occupation Unknown			
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 174.00			
C. Full Name (Last, First, Middle Initial) Bruce Casto			Date of Receipt M M / D D / Y Y Y Y Y Y 01 / 29 / 2016		
Mailing Address 9195 Infirmary Rd			Transaction ID : SA11AI.5584		
City Ravenna	State OH	Zip Code 44266	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item		
Name of Employer Best Efforts		Occupation Quality Department			
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 50.00			
SUBTOTAL of Receipts This Page (optional)			84.00		
TOTAL This Period (last page this line number only)					

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)
LYNCH FOR CONGRESS 16

A. Full Name (Last, First, Middle Initial)
Raymond Cellura

Mailing Address 100 Fox Hollow Dr

City Mayfield Hts State OH Zip Code 44124

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: 2016
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date 100.00

Date of Receipt

M M / D D / Y Y Y Y
01 / 29 / 2016

Transaction ID : SA11AI.5579

Amount of Each Receipt this Period

100.00

☐ Memo Item

B. Full Name (Last, First, Middle Initial)
Gayle Champion

Mailing Address 5582 S Ridge Rd

City Madison State OH Zip Code 44057

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: 2016
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date 25.00

Date of Receipt

M M / D D / Y Y Y Y
02 / 05 / 2016

Transaction ID : SA11AI.5734

Amount of Each Receipt this Period

25.00

☐ Memo Item

C. Full Name (Last, First, Middle Initial)
Gayle Champion

Mailing Address 5582 S Ridge Rd

City Madison State OH Zip Code 44057

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: 2016
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date 50.00

Date of Receipt

M M / D D / Y Y Y Y
02 / 12 / 2016

Transaction ID : SA11AI.5790

Amount of Each Receipt this Period

25.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

150.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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NAME OF COMMITTEE (In Full)
LYNCH FOR CONGRESS 16

A. Full Name (Last, First, Middle Initial) Mary Christmyer			Date of Receipt M M / D D / Y Y Y Y 02 / 02 / 2016	
Mailing Address 9234 Lori Jean Dr			Transaction ID : SA11AI.5589	
City	State	Zip Code	Amount of Each Receipt this Period 100.00	
Mentor	OH	44060	<input type="checkbox"/> Memo Item	
FEC ID number of contributing federal political committee.		C		
Name of Employer Retired		Occupation Retired		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 100.00		
B. Full Name (Last, First, Middle Initial) James Church			Date of Receipt M M / D D / Y Y Y Y 02 / 02 / 2016	
Mailing Address 741 Governors Circle			Transaction ID : SA11AI.5585	
City	State	Zip Code	Amount of Each Receipt this Period 25.00	
Kent	OH	44240	<input type="checkbox"/> Memo Item	
FEC ID number of contributing federal political committee.		C		
Name of Employer Software Specialists		Occupation Software Engineer		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 125.00		
C. Full Name (Last, First, Middle Initial) Carole Cialella			Date of Receipt M M / D D / Y Y Y Y 02 / 24 / 2016	
Mailing Address 7404 Avon Ln			Transaction ID : SA11AI.5686	
City	State	Zip Code	Amount of Each Receipt this Period 50.00	
Chesterland	OH	44026	<input type="checkbox"/> Memo Item	
FEC ID number of contributing federal political committee.		C		
Name of Employer Retired		Occupation Retired		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 50.00		
SUBTOTAL of Receipts This Page (optional).....			175.00	
TOTAL This Period (last page this line number only).....				

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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NAME OF COMMITTEE (In Full)
LYNCH FOR CONGRESS 16

A. Full Name (Last, First, Middle Initial) Jeff & Jacque Lyn Cicchella			Date of Receipt M M / D D / Y Y Y Y Y Y 02 / 01 / 2016	
Mailing Address 10170 Charlton Ln			Transaction ID : SA11AI.5715	
City Novelty	State OH	Zip Code 44072	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item		
Name of Employer Progressive Insurance		Occupation Information Technology		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 100.00		
B. Full Name (Last, First, Middle Initial) Jim Clark			Date of Receipt M M / D D / Y Y Y Y Y Y 02 / 01 / 2016	
Mailing Address 2581 Shenandoah Shores Rd			Transaction ID : SA11AI.5709	
City Front Royal	State VA	Zip Code 22630	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item		
Name of Employer Allison James Realty		Occupation Realtor		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 250.00		
C. Full Name (Last, First, Middle Initial) Kenneth Clark			Date of Receipt M M / D D / Y Y Y Y Y Y 02 / 05 / 2016	
Mailing Address 10275 Fountain Cir			Transaction ID : SA11AI.5730	
City Manassas	State VA	Zip Code 20110	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item		
Name of Employer Seton Home School		Occupation Attorney		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 100.00		
SUBTOTAL of Receipts This Page (optional).....			450.00	
TOTAL This Period (last page this line number only).....				

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)
LYNCH FOR CONGRESS 16

A. Full Name (Last, First, Middle Initial) Kevin Clark			Date of Receipt M M / D D / Y Y Y Y 02 / 19 / 2016	
Mailing Address 186 Morgans Rd			Transaction ID : SA11AI.5818	
City	State	Zip Code		
Front Royal	VA	22630		
FEC ID number of contributing federal political committee.		C	Amount of Each Receipt this Period 50.00	
Name of Employer Seton Home Study School		Occupation Computer Programmer	<input type="checkbox"/> Memo Item	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 150.00		
B. Full Name (Last, First, Middle Initial) Lucius Clark			Date of Receipt M M / D D / Y Y Y Y 02 / 13 / 2016	
Mailing Address 11895 Caves Rd			Transaction ID : SA11AI.5793	
City	State	Zip Code		
Chesterland	OH	44026		
FEC ID number of contributing federal political committee.		C	Amount of Each Receipt this Period 100.00	
Name of Employer MVP Supply Co.		Occupation Engineer	<input type="checkbox"/> Memo Item	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 100.00		
C. Full Name (Last, First, Middle Initial) Pamela Claypool			Date of Receipt M M / D D / Y Y Y Y 02 / 05 / 2016	
Mailing Address 12448 Bentbrook Dr			Transaction ID : SA11AI.5735	
City	State	Zip Code		
Chesterland	OH	44026		
FEC ID number of contributing federal political committee.		C	Amount of Each Receipt this Period 100.00	
Name of Employer Airgas		Occupation Div. President	<input type="checkbox"/> Memo Item	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 2600.00		
SUBTOTAL of Receipts This Page (optional).....			250.00	
TOTAL This Period (last page this line number only).....				

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

LYNCH FOR CONGRESS 16

Full Name (Last, First, Middle Initial)

A. Kay Clymer

Mailing Address 2235 Newark Rd

City

Zanesville

State

OH

Zip Code

43701

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		17		2016

Transaction ID : SA11AI.5805

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Mair Cohen

Mailing Address 4418 Churchill Blvd

City

University Hts

State

OH

Zip Code

44118

FEC ID number of contributing
federal political committee.

C

Name of Employer

RF

Occupation

MANAGER

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		05		2016

Transaction ID : SA11AI.5605

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Nancy Connell

Mailing Address 8516 Tanglewood Trl

City

Chagrin Falls

State

OH

Zip Code

44023

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

25.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		16		2016

Transaction ID : SA11AI.5661

Amount of Each Receipt this Period

25.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

525.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

LYNCH FOR CONGRESS 16

Full Name (Last, First, Middle Initial)

Ronald Cotman

A.

Mailing Address 9448 Winchester Valley

City

Chesterland

State

OH

Zip Code

44026

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

200.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		08		2016

Transaction ID : SA11AI.5606

Amount of Each Receipt this Period

200.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

James Cowan

B.

Mailing Address 6350 meanderingwood

City

madison

State

OH

Zip Code

44057

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self

Occupation

landlord

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

25.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		22		2016

Transaction ID : SA11AI.5821

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

George Csatary

C.

Mailing Address 4091 W 204th St

City

Fairview Park

State

OH

Zip Code

44126

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self

Occupation

CPA

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		23		2016

Transaction ID : SA11AI.5669

Amount of Each Receipt this Period

600.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

825.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)
LYNCH FOR CONGRESS 16

A. Full Name (Last, First, Middle Initial) Ed Curtis			Date of Receipt M M / D D / Y Y Y Y 02 / 02 / 2016		
Mailing Address 13582 Fox Hills Dr			Transaction ID : SA11AI.5719		
City Novelty	State OH	Zip Code 44072	Amount of Each Receipt this Period _____ 50.00		
FEC ID number of contributing federal political committee. C _____		<input type="checkbox"/> Memo Item			
Name of Employer Retired		Occupation Retired			
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date _____ 100.00			
B. Full Name (Last, First, Middle Initial) Ed Curtis			Date of Receipt M M / D D / Y Y Y Y 02 / 08 / 2016		
Mailing Address 13582 Fox Hills Dr			Transaction ID : SA11AI.5756		
City Novelty	State OH	Zip Code 44072	Amount of Each Receipt this Period _____ 25.00		
FEC ID number of contributing federal political committee. C _____		<input type="checkbox"/> Memo Item			
Name of Employer Retired		Occupation Retired			
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date _____ 125.00			
C. Full Name (Last, First, Middle Initial) Ed Curtis			Date of Receipt M M / D D / Y Y Y Y 02 / 17 / 2016		
Mailing Address 13582 Fox Hills Dr			Transaction ID : SA11AI.5801		
City Novelty	State OH	Zip Code 44072	Amount of Each Receipt this Period _____ 25.00		
FEC ID number of contributing federal political committee. C _____		<input type="checkbox"/> Memo Item			
Name of Employer Retired		Occupation Retired			
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date _____ 150.00			
SUBTOTAL of Receipts This Page (optional).....			_____ 100.00		
TOTAL This Period (last page this line number only).....			_____		

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)
LYNCH FOR CONGRESS 16

A. Full Name (Last, First, Middle Initial) Alice Davis			Date of Receipt M M / D D / Y Y Y Y 02 / 03 / 2016		
Mailing Address 316 Cherry Rdg			Transaction ID : SA11AI.5597		
City Aurora	State OH	Zip Code 44202	Amount of Each Receipt this Period _____ 15.00		
FEC ID number of contributing federal political committee. C _____		<input type="checkbox"/> Memo Item			
Name of Employer Retired		Occupation Retired			
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date _____ 15.00			
B. Full Name (Last, First, Middle Initial) BEVERLY DAVIS			Date of Receipt M M / D D / Y Y Y Y 02 / 05 / 2016		
Mailing Address 7094 BRIGHTWOOD DR			Transaction ID : SA11AI.5738		
City PAINESVILLE	State OH	Zip Code 44077	Amount of Each Receipt this Period _____ 50.00		
FEC ID number of contributing federal political committee. C _____		<input type="checkbox"/> Memo Item			
Name of Employer RETIRED		Occupation RETIRED			
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date _____ 150.00			
C. Full Name (Last, First, Middle Initial) Kathleen Davis			Date of Receipt M M / D D / Y Y Y Y 02 / 06 / 2016		
Mailing Address 12480 Chamberlain Rd			Transaction ID : SA11AI.5749		
City Aurora	State OH	Zip Code 44202	Amount of Each Receipt this Period _____ 50.00		
FEC ID number of contributing federal political committee. C _____		<input type="checkbox"/> Memo Item			
Name of Employer Retired		Occupation Retired			
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date _____ 107.00			
SUBTOTAL of Receipts This Page (optional).....			_____ 115.00		
TOTAL This Period (last page this line number only).....			_____		

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

LYNCH FOR CONGRESS 16

Full Name (Last, First, Middle Initial)

Kathleen Davis

A.

Mailing Address 12480 Chamberlain Rd

City

Aurora

State

OH

Zip Code

44202

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

157.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		10		2016

Transaction ID : SA11AI.5770

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

WILLIAM DEHOUSKE

B.

Mailing Address 12460 BENTBROOK DR

City

chesterland

State

OH

Zip Code

44026

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		01		2016

Transaction ID : SA11AI.5713

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

HARRY DIEMERT

C.

Mailing Address 341 E MAIN ST

City

PAINESVILLE

State

OH

Zip Code

44077

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

750.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01		19		2016

Transaction ID : SA11AI.5543

Amount of Each Receipt this Period

250.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

550.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

LYNCH FOR CONGRESS 16

Full Name (Last, First, Middle Initial)

HARRY DIEMERT

A.

Mailing Address 341 E MAIN ST

City

PAINESVILLE

State

OH

Zip Code

44077

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
02		23		2016

Transaction ID : SA11AI.5674

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Manning Dishler

B.

Mailing Address 23902 E Baintree Rd

City

Beachwood

State

OH

Zip Code

44122

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
02		16		2016

Transaction ID : SA11AI.5648

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Michael Domanick

C.

Mailing Address 333 Cornwall Rd

City

Rocky River

State

OH

Zip Code

44116

FEC ID number of contributing
federal political committee.

C

Name of Employer

Clearpath Group

Occupation

President

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

100.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
02		23		2016

Transaction ID : SA11AI.5667

Amount of Each Receipt this Period

100.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

850.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

LYNCH FOR CONGRESS 16

Full Name (Last, First, Middle Initial)

John Donelan

A.

Mailing Address 12834 State Rd

City

North Royalton

State

OH

Zip Code

44133

FEC ID number of contributing
federal political committee.

C

Name of Employer

Heights Driving School

Occupation

In Car Instructor

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

100.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01		06		2016

Transaction ID : SA11AI.5526

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

John Donelan

B.

Mailing Address 12834 State Rd

City

North Royalton

State

OH

Zip Code

44133

FEC ID number of contributing
federal political committee.

C

Name of Employer

Heights Driving School

Occupation

In Car Instructor

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

200.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		16		2016

Transaction ID : SA11AI.5654

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Cynthia Dreyer

C.

Mailing Address 12071 Butternut Rd

City

Newbury

State

OH

Zip Code

44065

FEC ID number of contributing
federal political committee.

C

Name of Employer

Christopher Tool

Occupation

A Tool Maker

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

50.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01		08		2016

Transaction ID : SA11AI.5532

Amount of Each Receipt this Period

25.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

225.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

LYNCH FOR CONGRESS 16

Full Name (Last, First, Middle Initial)

GREG FADORSEN**A.**

Mailing Address 13041 LIVERY LANE

City

CHARDON

State

OH

Zip Code

44024

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self Employed

Occupation

Financial Advisor

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

75.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01		25		2016

Transaction ID : SA11AI.5704

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

URSULA FICHT**B.**

Mailing Address 10850 Reservoir Dr

City

MANTUA

State

OH

Zip Code

44255

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

50.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01		29		2016

Transaction ID : SA11AI.5575

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

URSULA FICHT**C.**

Mailing Address 10850 Reservoir Dr

City

MANTUA

State

OH

Zip Code

44255

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

75.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		10		2016

Transaction ID : SA11AI.5776

Amount of Each Receipt this Period

25.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional).....**TOTAL** This Period (last page this line number only).....

75.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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☒ 11a 12 ☐ 11b 13a ☐ 11c 13b ☐ 11d 14 ☐ 15

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NAME OF COMMITTEE (In Full)
LYNCH FOR CONGRESS 16

A. Full Name (Last, First, Middle Initial) CAROLYN FIDANZA			Date of Receipt M M / D D / Y Y Y Y Y Y 02 / 12 / 2016	
Mailing Address 8405 SANCTUARY DR			Transaction ID : SA11AI.5642	
City	State	Zip Code	Amount of Each Receipt this Period 50.00	
MENTOR	OH	44060	<input type="checkbox"/> Memo Item	
FEC ID number of contributing federal political committee.		C		
Name of Employer Retired		Occupation Retired		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 100.00		
B. Full Name (Last, First, Middle Initial) Andrew Fink			Date of Receipt M M / D D / Y Y Y Y Y Y 02 / 06 / 2016	
Mailing Address 4764 Willoughcroft Rd.			Transaction ID : SA11AI.5750	
City	State	Zip Code	Amount of Each Receipt this Period 50.00	
Willoughby	OH	44094	<input type="checkbox"/> Memo Item	
FEC ID number of contributing federal political committee.		C		
Name of Employer Retired		Occupation Retired		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 150.00		
C. Full Name (Last, First, Middle Initial) Margaret Friend			Date of Receipt M M / D D / Y Y Y Y Y Y 01 / 29 / 2016	
Mailing Address 10001 Minyoung Rd.			Transaction ID : SA11AI.5577	
City	State	Zip Code	Amount of Each Receipt this Period 25.00	
Ravenna	OH	44266	<input type="checkbox"/> Memo Item	
FEC ID number of contributing federal political committee.		C		
Name of Employer Retired		Occupation Retired		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 45.00		
SUBTOTAL of Receipts This Page (optional).....			125.00	
TOTAL This Period (last page this line number only).....				

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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☒ 11a 12 ☐ 11b 13a ☐ 11c 13b ☐ 11d 14 ☐ 15

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NAME OF COMMITTEE (In Full)
LYNCH FOR CONGRESS 16

A. Full Name (Last, First, Middle Initial) Evelyn R Frohring		Date of Receipt M M / D D / Y Y Y Y 02 / 07 / 2016	
Mailing Address 15804 Munn Road		Transaction ID : SA11AI.5755	
City Newbury	State OH	Zip Code 44065	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00	
Name of Employer Best Efforts	Occupation Farmer		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 100.00		

B. Full Name (Last, First, Middle Initial) Louise Fyler		Date of Receipt M M / D D / Y Y Y Y 02 / 06 / 2016	
Mailing Address 184 Newport Dr		Transaction ID : SA11AI.5747	
City Painesville	State OH	Zip Code 44077	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 20.00	
Name of Employer Best Efforts	Occupation Best Efforts		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 20.00		

C. Full Name (Last, First, Middle Initial) BEVERLY GOLDSTEIN		Date of Receipt M M / D D / Y Y Y Y 01 / 13 / 2016	
Mailing Address 3386 Belvoir Dr		Transaction ID : SA11AI.5539	
City Beachwood	State OH	Zip Code 44122	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00	
Name of Employer Self	Occupation Audiologist		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 50.00		

SUBTOTAL of Receipts This Page (optional).....	170.00
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

LYNCH FOR CONGRESS 16

Full Name (Last, First, Middle Initial)

NIKKOLE GORFIDO**A.**

Mailing Address 1651 MENTOR AVE

City

PAINESVILLE

State

OH

Zip Code

44077

FEC ID number of contributing
federal political committee.

C

Name of Employer

Avery Dennison

Occupation

Application Consultant

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

100.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		19		2016

Transaction ID : SA11AI.5817

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Joseph Gorick**B.**

Mailing Address 18355 Quinn Rd

City

Chagrin Falls

State

OH

Zip Code

44023

FEC ID number of contributing
federal political committee.

C

Name of Employer

Chagrin Schools

Occupation

Bus Driver

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

20.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		08		2016

Transaction ID : SA11AI.5612

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Raymond Grant**C.**

Mailing Address 3007 Woodland Hills Dr

City

Kingwood

State

TX

Zip Code

77339

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

100.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		17		2016

Transaction ID : SA11AI.5804

Amount of Each Receipt this Period

100.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional).....**TOTAL** This Period (last page this line number only).....

220.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 29 OF 92
(check only one)
☒ 11a 12 ☐ 11b 13a ☐ 11c 13b ☐ 11d 14 ☐ 15

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NAME OF COMMITTEE (In Full)
LYNCH FOR CONGRESS 16

A. Full Name (Last, First, Middle Initial) Steve Grcevic Mailing Address 17371 Old Tannery Trl City State Zip Code Chagrin Falls OH 44023 FEC ID number of contributing federal political committee. C Name of Employer Occupation Family Center by the Falls Physician Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Election Cycle-to-Date 50.00			Date of Receipt <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">02 23 / 2016</div> </div> Transaction ID : SA11AI.5824 Amount of Each Receipt this Period <div style="border: 1px solid black; padding: 2px;">50.00</div> <input type="checkbox"/> Memo Item		
B. Full Name (Last, First, Middle Initial) Gary Grieco Mailing Address 18781 Chillicothe Rd City State Zip Code Chagrin Falls OH 44023 FEC ID number of contributing federal political committee. C Name of Employer Occupation Self-employed Self-employed Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Election Cycle-to-Date 125.00			Date of Receipt <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">02 05 / 2016</div> </div> Transaction ID : SA11AI.5736 Amount of Each Receipt this Period <div style="border: 1px solid black; padding: 2px;">25.00</div> <input type="checkbox"/> Memo Item		
C. Full Name (Last, First, Middle Initial) EUGENE GRIEWISCH Mailing Address 8362 SUMMIT DR City State Zip Code CHAGRIN FALLS OH 44023 FEC ID number of contributing federal political committee. C Name of Employer Occupation Retired Retired Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Election Cycle-to-Date 50.00			Date of Receipt <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">01 25 / 2016</div> </div> Transaction ID : SA11AI.5565 Amount of Each Receipt this Period <div style="border: 1px solid black; padding: 2px;">50.00</div> <input type="checkbox"/> Memo Item		
SUBTOTAL of Receipts This Page (optional).....			<div style="border: 1px solid black; padding: 2px;">125.00</div>		
TOTAL This Period (last page this line number only).....			<div style="border: 1px solid black; padding: 2px;"></div>		

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

LYNCH FOR CONGRESS 16

Full Name (Last, First, Middle Initial)

A. Low Griffin

Mailing Address 37606 Grove Ave

City

Willoughby

State

OH

Zip Code

44094

FEC ID number of contributing
federal political committee.

C

Name of Employer

Best Efforts

Occupation

Best Efforts

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

15.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		11		2016

Transaction ID : SA11AI.5780

Amount of Each Receipt this Period

15.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Daniel Groh

Mailing Address 3939 Cook Rd

City

Medina

State

OH

Zip Code

44256

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

50.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		01		2016

Transaction ID : SA11AI.5707

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Joanne Gross

Mailing Address PO Box 1538

City

Stow

State

OH

Zip Code

44224

FEC ID number of contributing
federal political committee.

C

Name of Employer

Best Efforts

Occupation

Best Efforts

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

50.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		05		2016

Transaction ID : SA11AI.5604

Amount of Each Receipt this Period

50.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional).....**TOTAL** This Period (last page this line number only).....

115.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

LYNCH FOR CONGRESS 16

Full Name (Last, First, Middle Initial)

Thomas Hach

A.

Mailing Address 11575 Fay Rd.

City

Concord

State

OH

Zip Code

44077

FEC ID number of contributing
federal political committee.

C

Name of Employer

DoD

Occupation

Project Mgr

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01		18		2016

Transaction ID : SA11AI.5698

Amount of Each Receipt this Period

150.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Thomas Hach

B.

Mailing Address 11575 Fay Rd.

City

Concord

State

OH

Zip Code

44077

FEC ID number of contributing
federal political committee.

C

Name of Employer

DoD

Occupation

Project Mgr

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

325.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		04		2016

Transaction ID : SA11AI.5727

Amount of Each Receipt this Period

75.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Thomas Hach

C.

Mailing Address 11575 Fay Rd.

City

Concord

State

OH

Zip Code

44077

FEC ID number of contributing
federal political committee.

C

Name of Employer

DoD

Occupation

Project Mgr

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

425.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		20		2016

Transaction ID : SA11AI.5819

Amount of Each Receipt this Period

100.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

325.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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☒ 11a 12 ☐ 11b 13a ☐ 11c 13b ☐ 11d 14 ☐ 15

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NAME OF COMMITTEE (In Full)
LYNCH FOR CONGRESS 16

A. Full Name (Last, First, Middle Initial) Harry Hackett		Date of Receipt M M / D D / Y Y Y Y 02 / 08 / 2016	
Mailing Address 385 Center St Apt. 75		Transaction ID : SA11AI.5613	
City	State	Zip Code	
Chardon	OH	44024	
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period 25.00	
Name of Employer Retired		<input type="checkbox"/> Memo Item	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 50.00	
B. Full Name (Last, First, Middle Initial) Susan Helsel		Date of Receipt M M / D D / Y Y Y Y 02 / 01 / 2016	
Mailing Address 2920 Pleasant Valley Dr SW		Transaction ID : SA11AI.5712	
City	State	Zip Code	
Warren	OH	44481	
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period 50.00	
Name of Employer Warren Trumbull City Public Library		<input type="checkbox"/> Memo Item	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 100.00	
C. Full Name (Last, First, Middle Initial) Susan Helsel		Date of Receipt M M / D D / Y Y Y Y 02 / 07 / 2016	
Mailing Address 2920 Pleasant Valley Dr SW		Transaction ID : SA11AI.5751	
City	State	Zip Code	
Warren	OH	44481	
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period 20.00	
Name of Employer Warren Trumbull City Public Library		<input type="checkbox"/> Memo Item	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 120.00	
SUBTOTAL of Receipts This Page (optional).....		95.00	
TOTAL This Period (last page this line number only).....			

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

LYNCH FOR CONGRESS 16

Full Name (Last, First, Middle Initial)

David Hippely

Mailing Address 14850 Meadowlark Lane

City

Middlefield

State

OH

Zip Code

44062

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

Retired

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01		29		2016

Transaction ID : SA11AI.5571

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Ellen Hollmeyer

Mailing Address 320 Hamlet Hills Dr

City

Chagrin Falls

State

OH

Zip Code

44022

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

25.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01		25		2016

Transaction ID : SA11AI.5549

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Catherine Horschler

Mailing Address 17259 LONG MEADOW Trl

City

Chagrin Falls

State

OH

Zip Code

44023

FEC ID number of contributing
federal political committee.

C

Name of Employer

Bainbridge body shop

Occupation

Owner

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		01		2016

Transaction ID : SA11AI.5710

Amount of Each Receipt this Period

50.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional).....**TOTAL** This Period (last page this line number only).....

325.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

LYNCH FOR CONGRESS 16

Full Name (Last, First, Middle Initial)

Catherine Horschler

Mailing Address 17259 LONG MEADOW Trl

City

Chagrin Falls

State

OH

Zip Code

44023

FEC ID number of contributing
federal political committee.

C

Name of Employer
Bainbridge body shopOccupation
Owner

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		01		2016

Transaction ID : SA11AI.5711

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Catherine Horschler

Mailing Address 17259 LONG MEADOW Trl

City

Chagrin Falls

State

OH

Zip Code

44023

FEC ID number of contributing
federal political committee.

C

Name of Employer
Bainbridge body shopOccupation
Owner

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

450.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		10		2016

Transaction ID : SA11AI.5774

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Ann M Horvath

Mailing Address 8803 S. Spring Valley Park Dr.

City

Chagrin Falls

State

OH

Zip Code

44023

FEC ID number of contributing
federal political committee.

C

Name of Employer
RetiredOccupation
Retired

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

25.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		12		2016

Transaction ID : SA11AI.5641

Amount of Each Receipt this Period

25.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

175.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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(check only one)

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☒ 11a 12 ☐ 11b 13a ☐ 11c 13b ☐ 11d 14 ☐ 15

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NAME OF COMMITTEE (In Full)
LYNCH FOR CONGRESS 16

A. Full Name (Last, First, Middle Initial) NEWELL D HOWARD			Date of Receipt M M / D D / Y Y Y Y 02 / 08 / 2016	
Mailing Address 201 MANORBROOK DR			Transaction ID : SA11AI.5608	
City	State	Zip Code		
South Russell	OH	44022		
FEC ID number of contributing federal political committee.		C		
Name of Employer Retired		Occupation Retired		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 100.00		
			Amount of Each Receipt this Period 100.00	
			<input type="checkbox"/> Memo Item	

B. Full Name (Last, First, Middle Initial) Les Irvine			Date of Receipt M M / D D / Y Y Y Y 02 / 03 / 2016	
Mailing Address PO Box 110			Transaction ID : SA11AI.5725	
City	State	Zip Code		
Miamiville	OH	45147		
FEC ID number of contributing federal political committee.		C		
Name of Employer Irvine Wood Recovery		Occupation Self		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 500.00		
			Amount of Each Receipt this Period 500.00	
			<input type="checkbox"/> Memo Item	

C. Full Name (Last, First, Middle Initial) EILEEN JACK			Date of Receipt M M / D D / Y Y Y Y 02 / 24 / 2016	
Mailing Address 7370 MOUNTAIN QUAIL PL			Transaction ID : SA11AI.5682	
City	State	Zip Code		
CONCORD	OH	44077		
FEC ID number of contributing federal political committee.		C		
Name of Employer Retired		Occupation Retired		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 100.00		
			Amount of Each Receipt this Period 100.00	
			<input type="checkbox"/> Memo Item	

SUBTOTAL of Receipts This Page (optional).....	700.00
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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(check only one)

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☒ 11a 12 ☐ 11b 13a ☐ 11c 13b ☐ 11d 14 ☐ 15

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NAME OF COMMITTEE (In Full)
LYNCH FOR CONGRESS 16

A. Full Name (Last, First, Middle Initial) Kathy L Johnson			Date of Receipt M M / D D / Y Y Y Y 02 / 09 / 2016	
Mailing Address 11263 Chardon Rd			Transaction ID : SA11AI.5763	
City	State	Zip Code		
Chardon	OH	44024		
FEC ID number of contributing federal political committee.			Amount of Each Receipt this Period _____ 50.00	
Name of Employer Kathleen J Miller & Assoc		Occupation Accounting/Tax	<input type="checkbox"/> Memo Item	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date _____ 50.00		

B. Full Name (Last, First, Middle Initial) ALLAN JOHNSTON			Date of Receipt M M / D D / Y Y Y Y 01 / 29 / 2016	
Mailing Address 849 ELMWOOD			Transaction ID : SA11AI.5580	
City	State	Zip Code		
WICKLIFFE	OH	44092		
FEC ID number of contributing federal political committee.			Amount of Each Receipt this Period _____ 25.00	
Name of Employer Retired		Occupation Retired	<input type="checkbox"/> Memo Item	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date _____ 25.00		

C. Full Name (Last, First, Middle Initial) Jeannine Jones			Date of Receipt M M / D D / Y Y Y Y 02 / 17 / 2016	
Mailing Address 716 Waterberry Ct			Transaction ID : SA11AI.5810	
City	State	Zip Code		
Avon Lake	OH	44012		
FEC ID number of contributing federal political committee.			Amount of Each Receipt this Period _____ 50.00	
Name of Employer BASF		Occupation Content Mgr	<input type="checkbox"/> Memo Item	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date _____ 50.00		

SUBTOTAL of Receipts This Page (optional).....	_____ 125.00
TOTAL This Period (last page this line number only).....	_____

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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FOR LINE NUMBER:
(check only one)

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☒ 11a 12 ☐ 11b 13a ☐ 11c 13b ☐ 11d 14 ☐ 15

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NAME OF COMMITTEE (In Full)
LYNCH FOR CONGRESS 16

A. Full Name (Last, First, Middle Initial) Carl Jurrus			Date of Receipt M M / D D / Y Y Y Y 01 / 13 / 2016	
Mailing Address 8375 Eagle Rd			Transaction ID : SA11AI.5693	
City	State	Zip Code	Amount of Each Receipt this Period 50.00	
Kirtland	OH	44094	<input type="checkbox"/> Memo Item	
FEC ID number of contributing federal political committee.		C		
Name of Employer Self-employed		Occupation Plaster/Stucco Contractor		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 50.00		
B. Full Name (Last, First, Middle Initial) Carl Jurrus			Date of Receipt M M / D D / Y Y Y Y 02 / 13 / 2016	
Mailing Address 8375 Eagle Rd			Transaction ID : SA11AI.5794	
City	State	Zip Code	Amount of Each Receipt this Period 25.00	
Kirtland	OH	44094	<input type="checkbox"/> Memo Item	
FEC ID number of contributing federal political committee.		C		
Name of Employer Self-employed		Occupation Plaster/Stucco Contractor		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 75.00		
C. Full Name (Last, First, Middle Initial) ANNE KACZMAREK			Date of Receipt M M / D D / Y Y Y Y 02 / 04 / 2016	
Mailing Address 780 CRACKEL RD			Transaction ID : SA11AI.5728	
City	State	Zip Code	Amount of Each Receipt this Period 200.00	
AURORA	OH	44202	<input type="checkbox"/> Memo Item	
FEC ID number of contributing federal political committee.		C		
Name of Employer Retired		Occupation Retired		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 950.00		
SUBTOTAL of Receipts This Page (optional).....			275.00	
TOTAL This Period (last page this line number only).....				

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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☒ 11a 12 ☐ 11b 13a ☐ 11c 13b ☐ 11d 14 ☐ 15

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NAME OF COMMITTEE (In Full)
LYNCH FOR CONGRESS 16

A. Full Name (Last, First, Middle Initial) ANNE KACZMAREK			Date of Receipt M M / D D / Y Y Y Y Y 02 / 09 / 2016	
Mailing Address 780 CRACKEL RD			Transaction ID : SA11AI.5766	
City	State	Zip Code		
AURORA	OH	44202		
FEC ID number of contributing federal political committee.		C	Amount of Each Receipt this Period 100.00	
Name of Employer Retired		Occupation Retired	<input type="checkbox"/> Memo Item	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 1050.00		
B. Full Name (Last, First, Middle Initial) Judith Kaminski			Date of Receipt M M / D D / Y Y Y Y Y 02 / 12 / 2016	
Mailing Address 32386 Brandon Place			Transaction ID : SA11AI.5637	
City	State	Zip Code		
Avon Lake	OH	44002		
FEC ID number of contributing federal political committee.		C	Amount of Each Receipt this Period 50.00	
Name of Employer Best Efforts		Occupation Best Efforts	<input type="checkbox"/> Memo Item	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 50.00		
C. Full Name (Last, First, Middle Initial) GWEN KANASTAB			Date of Receipt M M / D D / Y Y Y Y Y 02 / 10 / 2016	
Mailing Address 825-16 Chandler Lane			Transaction ID : SA11AI.5632	
City	State	Zip Code		
Aurora	OH	44202		
FEC ID number of contributing federal political committee.		C	Amount of Each Receipt this Period 25.00	
Name of Employer Retired		Occupation Retired	<input type="checkbox"/> Memo Item	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 150.00		
SUBTOTAL of Receipts This Page (optional).....			175.00	
TOTAL This Period (last page this line number only).....				

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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☒ 11a 12 ☐ 11b 13a ☐ 11c 13b ☐ 11d 14 ☐ 15

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NAME OF COMMITTEE (In Full)
LYNCH FOR CONGRESS 16

Full Name (Last, First, Middle Initial) A. kevin kapel			Date of Receipt M M / D D / Y Y Y Y 02 / 09 / 2016	
Mailing Address PO Box 951			Transaction ID : SA11AI.5769	
City chesterland	State OH	Zip Code 44026	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C		Memo Item <input type="checkbox"/>		
Name of Employer Self	Occupation Sales			
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 50.00			

Full Name (Last, First, Middle Initial) B. NORMA KERWIN			Date of Receipt M M / D D / Y Y Y Y 02 / 02 / 2016	
Mailing Address 7979 Birchwood Dr			Transaction ID : SA11AI.5595	
City CHESTERLAND	State OH	Zip Code 44026	Amount of Each Receipt this Period 200.00	
FEC ID number of contributing federal political committee. C		Memo Item <input type="checkbox"/>		
Name of Employer Retired	Occupation Retired			
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 200.00			

Full Name (Last, First, Middle Initial) C. Larry Kinnan			Date of Receipt M M / D D / Y Y Y Y 02 / 07 / 2016	
Mailing Address 2962 Ridgeline Trl			Transaction ID : SA11AI.5754	
City Stow	State OH	Zip Code 44224	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C		Memo Item <input type="checkbox"/>		
Name of Employer Wind River	Occupation Principal Technologist			
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 50.00			

SUBTOTAL of Receipts This Page (optional).....			300.00	
TOTAL This Period (last page this line number only).....				

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

LYNCH FOR CONGRESS 16

Full Name (Last, First, Middle Initial)

George Kovach

Mailing Address 16105 Madison Rd

City

Middlefield

State

OH

Zip Code

44062

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

20.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
01		25		2016

Transaction ID : SA11AI.5559

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

ROBERT LACZKO

Mailing Address 9095 ROBINSON RD

City

CHARDON

State

OH

Zip Code

44024

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

50.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
01		25		2016

Transaction ID : SA11AI.5553

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Shaun Laface

Mailing Address 38740 Genesee Lake Rd

City

Oconomowoc

State

WI

Zip Code

53066

FEC ID number of contributing
federal political committee.

C

Name of Employer

Laface Family

Occupation

Domestic Engineer/CFO

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

25.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
02		18		2016

Transaction ID : SA11AI.5812

Amount of Each Receipt this Period

25.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

70.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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☒ 11a 12 ☐ 11b 13a ☐ 11c 13b ☐ 11d 14 ☐ 15

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NAME OF COMMITTEE (In Full)
LYNCH FOR CONGRESS 16

Full Name (Last, First, Middle Initial) A. Dal Lanese			Date of Receipt M M / D D / Y Y Y Y 02 / 23 / 2016	
Mailing Address 11445 Kristine Dr			Transaction ID : SA11AI.5665	
City Chesterland	State OH	Zip Code 44026	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		Memo Item <input type="checkbox"/>		
Name of Employer Retired		Occupation Retired		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 100.00		

Full Name (Last, First, Middle Initial) B. Thomas Latta			Date of Receipt M M / D D / Y Y Y Y 02 / 08 / 2016	
Mailing Address 6400 Rio Vista			Transaction ID : SA11AI.5628	
City Painesville	State OH	Zip Code 44077	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		Memo Item <input type="checkbox"/>		
Name of Employer Best Efforts		Occupation Best Efforts		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 100.00		

Full Name (Last, First, Middle Initial) C. David Lawrence			Date of Receipt M M / D D / Y Y Y Y 01 / 16 / 2016	
Mailing Address 16675 Robinson Rd			Transaction ID : SA11AI.5695	
City Marysville	State OH	Zip Code 43040	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		Memo Item <input type="checkbox"/>		
Name of Employer Retired		Occupation Retired		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 100.00		

SUBTOTAL of Receipts This Page (optional).....			300.00	
TOTAL This Period (last page this line number only).....				

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

LYNCH FOR CONGRESS 16

Full Name (Last, First, Middle Initial)

David Lehrer

A.

Mailing Address 58 Bermont Ave

City

Munroe Falls

State

OH

Zip Code

44262

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired RN

Occupation

Retired

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

25.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		16		2016

Transaction ID : SA11AI.5798

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

RICHARD LILLY

B.

Mailing Address 1575 CHAPEL RD

City

JEFERSON

State

OH

Zip Code

44047

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

150.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01		24		2016

Transaction ID : SA11AI.5703

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

RICHARD LILLY

C.

Mailing Address 1575 CHAPEL RD

City

JEFERSON

State

OH

Zip Code

44047

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		09		2016

Transaction ID : SA11AI.5760

Amount of Each Receipt this Period

100.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

225.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

LYNCH FOR CONGRESS 16

Full Name (Last, First, Middle Initial)

DAVID LYNCH**A.**

Mailing Address 216 Wells Ct

City

Euclid

State

OH

Zip Code

44132

FEC ID number of contributing
federal political committee.

C

Name of Employer
SelfOccupation
Attorney

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		03		2016

Transaction ID : SA11AI.5601

Amount of Each Receipt this Period

1350.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

DAVID LYNCH**B.**

Mailing Address 216 Wells Ct

City

Euclid

State

OH

Zip Code

44132

FEC ID number of contributing
federal political committee.

C

Name of Employer
SelfOccupation
Attorney

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2700.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		08		2016

Transaction ID : SA11AI.5617

Amount of Each Receipt this Period

1350.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

NANCY LYNCH**C.**

Mailing Address 216 Wells Ct

City

Euclid

State

OH

Zip Code

44123

FEC ID number of contributing
federal political committee.

C

Name of Employer
HomemakerOccupation
Homemaker

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		03		2016

Transaction ID : SA11AI.5602

Amount of Each Receipt this Period

1350.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional).....**TOTAL** This Period (last page this line number only).....

4050.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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FOR LINE NUMBER:

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

LYNCH FOR CONGRESS 16

Full Name (Last, First, Middle Initial)

NANCY LYNCH

A.

Mailing Address 216 Wells Ct

City

Euclid

State

OH

Zip Code

44123

FEC ID number of contributing
federal political committee.

C

Name of Employer

Homemaker

Occupation

Homemaker

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2700.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		08		2016

Transaction ID : SA11AI.5618

Amount of Each Receipt this Period

1350.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

David Macko

B.

Mailing Address 28810 Cannon Rd.

City

Solon

State

OH

Zip Code

44139

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

100.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		23		2016

Transaction ID : SA11AI.5676

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

James Macneal

C.

Mailing Address 16731 Claridon Troy Rd

City

Burton

State

OH

Zip Code

44021

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-Employed

Occupation

Sales

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

50.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01		25		2016

Transaction ID : SA11AI.5564

Amount of Each Receipt this Period

50.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1500.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

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☒ 11a 12 ☐ 11b 13a ☐ 11c 13b ☐ 11d 14 ☐ 15

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NAME OF COMMITTEE (In Full)
LYNCH FOR CONGRESS 16

A. Full Name (Last, First, Middle Initial) Barbara Matuska			Date of Receipt M M / D D / Y Y Y Y 02 / 12 / 2016	
Mailing Address 1646 Parker Dr			Transaction ID : SA11AI.5635	
City	State	Zip Code	Amount of Each Receipt this Period 25.00	
Mayfield Hts	OH	44124	<input type="checkbox"/> Memo Item	
FEC ID number of contributing federal political committee. C				
Name of Employer Best Efforts		Occupation Best Efforts		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 25.00		
B. Full Name (Last, First, Middle Initial) Laura McGuinness			Date of Receipt M M / D D / Y Y Y Y 01 / 08 / 2016	
Mailing Address 30001 Barjode Rd			Transaction ID : SA11AI.5536	
City	State	Zip Code	Amount of Each Receipt this Period 100.00	
Willowick	OH	44095	<input type="checkbox"/> Memo Item	
FEC ID number of contributing federal political committee. C				
Name of Employer Retired		Occupation Retired		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 100.00		
C. Full Name (Last, First, Middle Initial) Arzella Melnyk			Date of Receipt M M / D D / Y Y Y Y 02 / 24 / 2016	
Mailing Address 10506 Hobart Rd			Transaction ID : SA11AI.5681	
City	State	Zip Code	Amount of Each Receipt this Period 250.00	
Kirtland	OH	44094	<input type="checkbox"/> Memo Item	
FEC ID number of contributing federal political committee. C				
Name of Employer Best Efforts		Occupation Best Efforts		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 250.00		
SUBTOTAL of Receipts This Page (optional).....			375.00	
TOTAL This Period (last page this line number only).....				

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

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☒ 11a 12 ☐ 11b 13a ☐ 11c 13b ☐ 11d 14 ☐ 15

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NAME OF COMMITTEE (In Full)
LYNCH FOR CONGRESS 16

A. Full Name (Last, First, Middle Initial) JOANNA MIELE		Date of Receipt M M / D D / Y Y Y Y 02 / 10 / 2016	
Mailing Address 540 OAKMONT LANE		Transaction ID : SA11AI.5775	
City AURORA	State OH	Zip Code 44202	Amount of Each Receipt this Period _____ 50.00
FEC ID number of contributing federal political committee. C _____		<input type="checkbox"/> Memo Item	
Name of Employer Best Efforts	Occupation Best Efforts		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 50.00		

B. Full Name (Last, First, Middle Initial) Jack Moberg		Date of Receipt M M / D D / Y Y Y Y 01 / 06 / 2016	
Mailing Address 314 6th St		Transaction ID : SA11AI.5528	
City Marietta	State OH	Zip Code 45750	Amount of Each Receipt this Period _____ 50.00
FEC ID number of contributing federal political committee. C _____		<input type="checkbox"/> Memo Item	
Name of Employer Juice Plus	Occupation Independent Contractor		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 50.00		

C. Full Name (Last, First, Middle Initial) Barry Momyer		Date of Receipt M M / D D / Y Y Y Y 02 / 08 / 2016	
Mailing Address PO Box 104		Transaction ID : SA11AI.5621	
City Hopedale	State OH	Zip Code 43976	Amount of Each Receipt this Period _____ 25.00
FEC ID number of contributing federal political committee. C _____		<input type="checkbox"/> Memo Item	
Name of Employer AM Health & Safety	Occupation Industrial Hygiene Consultant		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 50.00		

SUBTOTAL of Receipts This Page (optional).....	_____ 125.00
TOTAL This Period (last page this line number only).....	_____

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)
LYNCH FOR CONGRESS 16

A. Full Name (Last, First, Middle Initial) Edee Monnen			Date of Receipt <table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td>02</td> <td></td> <td>17</td> <td></td> <td>2016</td> </tr> </table>		M M M	/	D D D	/	Y Y Y Y Y Y	02		17		2016
M M M	/	D D D	/	Y Y Y Y Y Y										
02		17		2016										
Mailing Address 621 Diamond St			Transaction ID : SA11AI.5808											
City	State	Zip Code												
Easton	MD	21601												
FEC ID number of contributing federal political committee.			Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="5">100.00</td> </tr> </table>		100.00									
100.00														
Name of Employer Retired		Occupation Retired	<input type="checkbox"/> Memo Item											
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date <table border="1"> <tr> <td colspan="5">100.00</td> </tr> </table>			100.00									
100.00														

B. Full Name (Last, First, Middle Initial) Barbara Monteith			Date of Receipt <table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td>02</td> <td></td> <td>12</td> <td></td> <td>2016</td> </tr> </table>		M M M	/	D D D	/	Y Y Y Y Y Y	02		12		2016
M M M	/	D D D	/	Y Y Y Y Y Y										
02		12		2016										
Mailing Address 3095 Silver Lake Blvd			Transaction ID : SA11AI.5644											
City	State	Zip Code												
Silver Lake	OH	44224												
FEC ID number of contributing federal political committee.			Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="5">150.00</td> </tr> </table>		150.00									
150.00														
Name of Employer Retired		Occupation Retired	<input type="checkbox"/> Memo Item											
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date <table border="1"> <tr> <td colspan="5">150.00</td> </tr> </table>			150.00									
150.00														

C. Full Name (Last, First, Middle Initial) Charles Moosbrugger			Date of Receipt <table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td>02</td> <td></td> <td>16</td> <td></td> <td>2016</td> </tr> </table>		M M M	/	D D D	/	Y Y Y Y Y Y	02		16		2016
M M M	/	D D D	/	Y Y Y Y Y Y										
02		16		2016										
Mailing Address 7175 Brook Ln			Transaction ID : SA11AI.5663											
City	State	Zip Code												
Chesterland	OH	44026												
FEC ID number of contributing federal political committee.			Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="5">50.00</td> </tr> </table>		50.00									
50.00														
Name of Employer Retired		Occupation Retired	<input type="checkbox"/> Memo Item											
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date <table border="1"> <tr> <td colspan="5">50.00</td> </tr> </table>			50.00									
50.00														

SUBTOTAL of Receipts This Page (optional).....			<table border="1"> <tr> <td colspan="5">300.00</td> </tr> </table>		300.00				
300.00									
TOTAL This Period (last page this line number only).....			<table border="1"> <tr> <td colspan="5"></td> </tr> </table>						

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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☒ 11a 12 ☐ 11b 13a ☐ 11c 13b ☐ 11d 14 ☐ 15

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NAME OF COMMITTEE (In Full)
LYNCH FOR CONGRESS 16

A. Full Name (Last, First, Middle Initial) Patricia Munk		Date of Receipt M M / D D / Y Y Y Y 01 / 06 / 2016	
Mailing Address 758 Sandlewood Ln		Transaction ID : SA11AI.5530	
City Chagrin Falls	State OH	Zip Code 44023	Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item	
Name of Employer Homemaker	Occupation Homemaker		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 100.00		
B. Full Name (Last, First, Middle Initial) James Musacchio		Date of Receipt M M / D D / Y Y Y Y 01 / 23 / 2016	
Mailing Address 6674 Breezewood Rd		Transaction ID : SA11AI.5700	
City Painesville	State OH	Zip Code 44077	Amount of Each Receipt this Period 10.00
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item	
Name of Employer Best Efforts	Occupation Best Efforts		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 10.00		
C. Full Name (Last, First, Middle Initial) Russell Myers		Date of Receipt M M / D D / Y Y Y Y 02 / 02 / 2016	
Mailing Address 237 Sunset Dr		Transaction ID : SA11AI.5723	
City Hudson	State OH	Zip Code 44236	Amount of Each Receipt this Period 25.00
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item	
Name of Employer Channel Products	Occupation Engineer		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 25.00		
SUBTOTAL of Receipts This Page (optional).....		135.00	
TOTAL This Period (last page this line number only).....			

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

LYNCH FOR CONGRESS 16

Full Name (Last, First, Middle Initial)

Wanda Myers

A.

Mailing Address 14326 Claridon Troy Rd

City

Burton

State

OH

Zip Code

44021

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

75.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		04		2016

Transaction ID : SA11AI.5726

Amount of Each Receipt this Period

75.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

JOAN NEMETH

B.

Mailing Address 15110 HOOK HOLLOW RD

City

NOVELTY

State

OH

Zip Code

44072

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

50.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		08		2016

Transaction ID : SA11AI.5622

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Norma Nero

C.

Mailing Address 13090 Spring Blossom Tral

City

Chesterland

State

OH

Zip Code

44026

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self

Occupation

Medical Transcription

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

25.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		08		2016

Transaction ID : SA11AI.5626

Amount of Each Receipt this Period

25.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

150.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

LYNCH FOR CONGRESS 16

Full Name (Last, First, Middle Initial)

Ken Palesh

Mailing Address 10705 calico Ln

City

Chardon

State

OH

Zip Code

44024

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Accountant

Receipt For: 2016



Primary



General



Other (specify)

Election Cycle-to-Date

100.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		10		2016

Transaction ID : SA11AI.5773

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Venera Paoletto

Mailing Address 8564 Cottrell Dr

City

Chesterland

State

OH

Zip Code

44026

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2016



Primary



General



Other (specify)

Election Cycle-to-Date

100.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		23		2016

Transaction ID : SA11AI.5678

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Thomas Parkin

Mailing Address 91 S Maple St

City

Orwell

State

OH

Zip Code

44076

FEC ID number of contributing
federal political committee.

C

Name of Employer

Sanfrey Freight Services

Occupation

Truck Driver

Receipt For: 2016



Primary



General



Other (specify)

Election Cycle-to-Date

20.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		05		2016

Transaction ID : SA11AI.5742

Amount of Each Receipt this Period

20.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional).....

220.00

TOTAL This Period (last page this line number only).....

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

LYNCH FOR CONGRESS 16

Full Name (Last, First, Middle Initial)

William Pascoe

A.

Mailing Address 3620 Drews Ct.

City

Alexandria

State

VA

Zip Code

22309

FEC ID number of contributing
federal political committee.

C

Name of Employer

Antietam Communications

Occupation

Consultant

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		09		2016

Transaction ID : SA11AI.5759

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Carolyn Patton

B.

Mailing Address 35336 Martin Dr

City

Willoughby Hills

State

OH

Zip Code

44094-8311

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01		11		2016

Transaction ID : SA11AI.5537

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

JOHN PAVLIC

C.

Mailing Address 5561 KINSMAN RD

City

Middlefield

State

OH

Zip Code

44062

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

150.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01		15		2016

Transaction ID : SA11AI.5541

Amount of Each Receipt this Period

100.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

625.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

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☒ 11a 12 ☐ 11b 13a ☐ 11c 13b ☐ 11d 14 ☐ 15

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NAME OF COMMITTEE (In Full)
LYNCH FOR CONGRESS 16

Full Name (Last, First, Middle Initial)

JOHN PAVLIC

Mailing Address 5561 KINSMAN RD

City

Middlefield

State

OH

Zip Code

44062

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

175.00

Date of Receipt

M M / D D / Y Y Y Y
02 / 10 / 2016

Transaction ID : SA11AI.5771

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Betty Ann Pentek

Mailing Address 943 Northboro Dr

City

Mayfield Village

State

OH

Zip Code

44143

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

100.00

Date of Receipt

M M / D D / Y Y Y Y
02 / 02 / 2016

Transaction ID : SA11AI.5591

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

MICHAEL PETTI

Mailing Address 226 S PARK DR

City

AURORA

State

OH

Zip Code

44202

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

100.00

Date of Receipt

M M / D D / Y Y Y Y
01 / 25 / 2016

Transaction ID : SA11AI.5554

Amount of Each Receipt this Period

50.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

175.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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FOR LINE NUMBER:

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

LYNCH FOR CONGRESS 16

Full Name (Last, First, Middle Initial)

MICHAEL PETTI

A.

Mailing Address 226 S PARK DR

City

AURORA

State

OH

Zip Code

44202

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

150.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		10		2016

Transaction ID : SA11AI.5631

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Pat Pfeiler

B.

Mailing Address 651 Sturbridge Dr
Unit 11

City

Medina

State

OH

Zip Code

44256

FEC ID number of contributing
federal political committee.

C

Name of Employer

Chic

Occupation

Customer Service

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

75.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		08		2016

Transaction ID : SA11AI.5620

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

JULIE PFENNING

C.

Mailing Address 1536 SHEFFIELD RD

City

SOUTH EUCLID

State

OH

Zip Code

44121

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self

Occupation

Paralegal

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

170.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		12		2016

Transaction ID : SA11AI.5639

Amount of Each Receipt this Period

20.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

95.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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NAME OF COMMITTEE (In Full)
LYNCH FOR CONGRESS 16

A. Full Name (Last, First, Middle Initial) Tony Pfenning			Date of Receipt M M / D D / Y Y Y Y 02 / 01 / 2016		
Mailing Address 8162 Chagrin Rd			Transaction ID : SA11AI.5716		
City Chagrin Falls	State OH	Zip Code 44023	Amount of Each Receipt this Period _____ 100.00		
FEC ID number of contributing federal political committee. C _____		<input type="checkbox"/> Memo Item			
Name of Employer Retired		Occupation Retired			
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date _____ 100.00			
B. Full Name (Last, First, Middle Initial) Tony Pfenning			Date of Receipt M M / D D / Y Y Y Y 02 / 08 / 2016		
Mailing Address 8162 Chagrin Rd			Transaction ID : SA11AI.5624		
City Chagrin Falls	State OH	Zip Code 44023	Amount of Each Receipt this Period _____ 200.00		
FEC ID number of contributing federal political committee. C _____		<input type="checkbox"/> Memo Item			
Name of Employer Retired		Occupation Retired			
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date _____ 300.00			
C. Full Name (Last, First, Middle Initial) Elliot Pilarczyk			Date of Receipt M M / D D / Y Y Y Y 02 / 05 / 2016		
Mailing Address 216 GILLET St			Transaction ID : SA11AI.5737		
City Painesville	State OH	Zip Code 44077	Amount of Each Receipt this Period _____ 50.00		
FEC ID number of contributing federal political committee. C _____		<input type="checkbox"/> Memo Item			
Name of Employer Progressive Insurance		Occupation CSR			
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date _____ 1050.00			
SUBTOTAL of Receipts This Page (optional).....			_____ 350.00		
TOTAL This Period (last page this line number only).....			_____		

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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(check only one)

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☒ 11a 12 ☐ 11b 13a ☐ 11c 13b ☐ 11d 14 ☐ 15

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NAME OF COMMITTEE (In Full)
LYNCH FOR CONGRESS 16

A. Full Name (Last, First, Middle Initial) Rita Politzer		Date of Receipt M M / D D / Y Y Y Y 01 / 25 / 2016	
Mailing Address 7456 Mountain Park Dr		Transaction ID : SA11AI.5562	
City Concord	State OH	Zip Code 44060	Amount of Each Receipt this Period 10.00
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item	
Name of Employer Retired	Occupation Retired		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 80.00		
B. Full Name (Last, First, Middle Initial) Robert Polomsky		Date of Receipt M M / D D / Y Y Y Y 02 / 03 / 2016	
Mailing Address 3751 Porter Rd		Transaction ID : SA11AI.5600	
City Rootstown	State OH	Zip Code 44272	Amount of Each Receipt this Period 25.00
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item	
Name of Employer Catholic Diocese	Occupation Associate		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 50.00		
C. Full Name (Last, First, Middle Initial) Richard Powidel		Date of Receipt M M / D D / Y Y Y Y 02 / 16 / 2016	
Mailing Address 6574 Arbordale Ave		Transaction ID : SA11AI.5650	
City Solon	State OH	Zip Code 44139	Amount of Each Receipt this Period 50.00
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item	
Name of Employer Best Efforts	Occupation Best Efforts		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 50.00		
SUBTOTAL of Receipts This Page (optional).....		85.00	
TOTAL This Period (last page this line number only).....			

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

LYNCH FOR CONGRESS 16

Full Name (Last, First, Middle Initial)

TIBOR PROKAY

Mailing Address 9088 Mayfield Rd

City

CHESTERLAND

State

OH

Zip Code

44026

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

200.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		08		2016

Transaction ID : SA11AI.5607

Amount of Each Receipt this Period

200.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

GEORGE QUAY

Mailing Address 17075 Savage Rd

City

CHAGRIN FALLS

State

OH

Zip Code

44023

FEC ID number of contributing
federal political committee.

C

Name of Employer

Don Coffey Co

Occupation

Manufacturers' Rep

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		09		2016

Transaction ID : SA11AI.5761

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Louis Radakovich

Mailing Address 8730 Bainbridge Rd

City

Chagrin Falls

State

OH

Zip Code

44023

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

50.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01		22		2016

Transaction ID : SA11AI.5547

Amount of Each Receipt this Period

50.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional).....**TOTAL** This Period (last page this line number only).....

750.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)
LYNCH FOR CONGRESS 16

Full Name (Last, First, Middle Initial)

Nancy Reed

Mailing Address 71 E 197th St

City State Zip Code
Euclid OH 44119

FEC ID number of contributing
federal political committee.

C

Name of Employer
Best Efforts

Occupation
Best Efforts

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

25.00

Date of Receipt

M M / D D / Y Y Y Y
01 25 2016

Transaction ID : SA11AI.5556

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

KARL REUTHER

Mailing Address 2950 MILLBORO RD

City State Zip Code
Silver Lake OH 44224

FEC ID number of contributing
federal political committee.

C

Name of Employer
Reuther Mold & Mfg. Co.

Occupation
Manager

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

100.00

Date of Receipt

M M / D D / Y Y Y Y
02 17 2016

Transaction ID : SA11AI.5802

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

John Rhoad

Mailing Address 1037 Glenn Ave

City State Zip Code
Washington Court House OH 43160

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

200.00

Date of Receipt

M M / D D / Y Y Y Y
02 17 2016

Transaction ID : SA11AI.5806

Amount of Each Receipt this Period

100.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

225.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

LYNCH FOR CONGRESS 16

Full Name (Last, First, Middle Initial)

Elliott Rice

A.

Mailing Address 120 Center St

City

Jefferson

State

OH

Zip Code

44047

FEC ID number of contributing
federal political committee.

C

Name of Employer
SelfOccupation
Dentist

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01		23		2016

Transaction ID : SA11AI.5702

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Howard S Rich

B.

Mailing Address 108 Arch St

City

Philadelphia

State

PA

Zip Code

19106

FEC ID number of contributing
federal political committee.

C

Name of Employer
ALGOccupation
Real Estate

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2700.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01		25		2016

Transaction ID : SA11AI.5552

Amount of Each Receipt this Period

2700.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Ronald Riedel

C.

Mailing Address 23311 Elm Rd

City

North Olmstead

State

OH

Zip Code

44070

FEC ID number of contributing
federal political committee.

C

Name of Employer
RetiredOccupation
Retired

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

50.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01		25		2016

Transaction ID : SA11AI.5550

Amount of Each Receipt this Period

25.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

2975.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)
LYNCH FOR CONGRESS 16

A. Full Name (Last, First, Middle Initial) Sal Rizzo			Date of Receipt M M / D D / Y Y Y Y 01 / 29 / 2016		
Mailing Address 35 Wintergreen Hill Dr			Transaction ID : SA11AI.5576		
City	State	Zip Code	Amount of Each Receipt this Period _____ 100.00		
Painesville	OH	44077	<input type="checkbox"/> Memo Item		
FEC ID number of contributing federal political committee.		<input type="text"/> C	Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
Name of Employer Retired		Occupation Retired	Election Cycle-to-Date _____ 200.00		
B. Full Name (Last, First, Middle Initial) Lee Rodenfels			Date of Receipt M M / D D / Y Y Y Y 01 / 30 / 2016		
Mailing Address 7278 Selworthy Ln			Transaction ID : SA11AI.5517		
City	State	Zip Code	Amount of Each Receipt this Period _____ 50.00		
Solon	OH	44139	<input type="checkbox"/> Memo Item		
FEC ID number of contributing federal political committee.		<input type="text"/> C	Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
Name of Employer Best Efforts		Occupation Best Efforts	Election Cycle-to-Date _____ 50.00		
C. Full Name (Last, First, Middle Initial) Lee Rodenfels			Date of Receipt M M / D D / Y Y Y Y 02 / 01 / 2016		
Mailing Address 7278 Selworthy Ln			Transaction ID : SA11AI.5518		
City	State	Zip Code	Amount of Each Receipt this Period _____ 50.00		
Solon	OH	44139	<input type="checkbox"/> Memo Item		
FEC ID number of contributing federal political committee.		<input type="text"/> C	Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
Name of Employer Best Efforts		Occupation Best Efforts	Election Cycle-to-Date _____ 100.00		
SUBTOTAL of Receipts This Page (optional).....			_____ 200.00		
TOTAL This Period (last page this line number only).....			_____		

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

LYNCH FOR CONGRESS 16

Full Name (Last, First, Middle Initial)

A. Chuck Ruth

Mailing Address 38130 Glenbury Ln

City

Willoughby

State

OH

Zip Code

44094

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cornerstone Christian Academy

Occupation

Accountant

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

25.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		15		2016

Transaction ID : SA11AI.5796

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Marie Rybicki

Mailing Address 4113 Ashbourne Ct

City

Copley

State

OH

Zip Code

44321

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

25.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		18		2016

Transaction ID : SA11AI.5814

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Timothy Sabula

Mailing Address 12305 Valley Vista Dr

City

Chesterland

State

OH

Zip Code

44026

FEC ID number of contributing
federal political committee.

C

Name of Employer

Best Efforts

Occupation

Best Efforts

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

25.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		23		2016

Transaction ID : SA11AI.5680

Amount of Each Receipt this Period

25.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

75.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)
LYNCH FOR CONGRESS 16

A. Full Name (Last, First, Middle Initial)
BARBARA SAIFMAN

Mailing Address 901 BALBOA CT

City PAINESVILLE State OH Zip Code 44077

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: 2016
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date 100.00

Date of Receipt

M M / D D / Y Y Y Y
02 / 16 / 2016

Transaction ID : SA11AI.5653

Amount of Each Receipt this Period

50.00

☐ Memo Item

B. Full Name (Last, First, Middle Initial)
Charles Sarson

Mailing Address 16745 Jennifer Ln

City Chagrin Falls State OH Zip Code 44023

FEC ID number of contributing federal political committee. **C**

Name of Employer Best Efforts Occupation Engineer

Receipt For: 2016
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date 25.00

Date of Receipt

M M / D D / Y Y Y Y
02 / 09 / 2016

Transaction ID : SA11AI.5765

Amount of Each Receipt this Period

25.00

☐ Memo Item

C. Full Name (Last, First, Middle Initial)
Gregory Sasse

Mailing Address 6642 Silvermound Dr

City Mentor State OH Zip Code 44060

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-employed Occupation Attorney

Receipt For: 2016
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date 25.00

Date of Receipt

M M / D D / Y Y Y Y
01 / 13 / 2016

Transaction ID : SA11AI.5691

Amount of Each Receipt this Period

25.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

100.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)
LYNCH FOR CONGRESS 16

A. Full Name (Last, First, Middle Initial) Rita Scott			Date of Receipt M M / D D / Y Y Y Y 01 / 19 / 2016		
Mailing Address 206 Saint Andrews Ln			Transaction ID : SA11AI.5545		
City Aurora		State OH	Zip Code 44202		
FEC ID number of contributing federal political committee. C			Amount of Each Receipt this Period 1200.00		
Name of Employer Little Explorers		Occupation Owner		<input type="checkbox"/> Memo Item	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 1200.00			
B. Full Name (Last, First, Middle Initial) John Sexton			Date of Receipt M M / D D / Y Y Y Y 01 / 29 / 2016		
Mailing Address 27165 Cameron Avenue			Transaction ID : SA11AI.5572		
City Euclid		State OH	Zip Code 44132		
FEC ID number of contributing federal political committee. C			Amount of Each Receipt this Period 500.00		
Name of Employer Retired		Occupation Retired		<input type="checkbox"/> Memo Item	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 700.00			
C. Full Name (Last, First, Middle Initial) Pamela Shaker-Maurer			Date of Receipt M M / D D / Y Y Y Y 02 / 02 / 2016		
Mailing Address 9711 Pekin Rd			Transaction ID : SA11AI.5593		
City Novelty		State OH	Zip Code 44072		
FEC ID number of contributing federal political committee. C			Amount of Each Receipt this Period 25.00		
Name of Employer Homemaker		Occupation Homemaker		<input type="checkbox"/> Memo Item	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 25.00			
SUBTOTAL of Receipts This Page (optional).....			1725.00		
TOTAL This Period (last page this line number only).....					

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)
LYNCH FOR CONGRESS 16

A. Full Name (Last, First, Middle Initial) Elaine Shawhan			Date of Receipt M M / D D / Y Y Y Y 01 / 29 / 2016		
Mailing Address 8084 Long Forest Dr			Transaction ID : SA11AI.5582		
City Brecksville	State OH	Zip Code 44141	Amount of Each Receipt this Period _____ 200.00		
FEC ID number of contributing federal political committee. C _____		<input type="checkbox"/> Memo Item			
Name of Employer Catholic Diocese of Cleveland		Occupation Tribunal Auditor			
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____		Election Cycle-to-Date _____ 200.00			
B. Full Name (Last, First, Middle Initial) George Shoda			Date of Receipt M M / D D / Y Y Y Y 02 / 06 / 2016		
Mailing Address 4706 Maple St			Transaction ID : SA11AI.5745		
City Willoughby	State OH	Zip Code 44094	Amount of Each Receipt this Period _____ 50.00		
FEC ID number of contributing federal political committee. C _____		<input type="checkbox"/> Memo Item			
Name of Employer Retired		Occupation Retired			
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____		Election Cycle-to-Date _____ 100.00			
C. Full Name (Last, First, Middle Initial) Donna Shumay			Date of Receipt M M / D D / Y Y Y Y 02 / 12 / 2016		
Mailing Address 18053 Alden St			Transaction ID : SA11AI.5647		
City Chagrin Falls	State OH	Zip Code 44023	Amount of Each Receipt this Period _____ 25.00		
FEC ID number of contributing federal political committee. C _____		<input type="checkbox"/> Memo Item			
Name of Employer arcon equipment		Occupation sales			
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____		Election Cycle-to-Date _____ 25.00			
SUBTOTAL of Receipts This Page (optional)			_____ 275.00		
TOTAL This Period (last page this line number only)			_____		

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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NAME OF COMMITTEE (In Full)
LYNCH FOR CONGRESS 16

A. Full Name (Last, First, Middle Initial) PAULA A SKRZYPEK			Date of Receipt M M / D D / Y Y Y Y 02 / 09 / 2016	
Mailing Address 9043 Terrace Park Dr			Transaction ID : SA11AI.5767	
City	State	Zip Code	Amount of Each Receipt this Period 10.00	
Mentor	OH	44060	<input type="checkbox"/> Memo Item	
FEC ID number of contributing federal political committee.		C		
Name of Employer Retired		Occupation Retired		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 35.00		
B. Full Name (Last, First, Middle Initial) Miriam Smotek			Date of Receipt M M / D D / Y Y Y Y 01 / 06 / 2016	
Mailing Address 38 Daisy Ln			Transaction ID : SA11AI.5531	
City	State	Zip Code	Amount of Each Receipt this Period 10.00	
Chagrin Falls	OH	44022	<input type="checkbox"/> Memo Item	
FEC ID number of contributing federal political committee.		C		
Name of Employer Retired		Occupation Retired		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 20.00		
C. Full Name (Last, First, Middle Initial) Stevie Snook			Date of Receipt M M / D D / Y Y Y Y 02 / 12 / 2016	
Mailing Address 18275 Haskins Rd.			Transaction ID : SA11AI.5638	
City	State	Zip Code	Amount of Each Receipt this Period 50.00	
Chagrin Falls	OH	44023	<input type="checkbox"/> Memo Item	
FEC ID number of contributing federal political committee.		C		
Name of Employer Retired		Occupation Retired		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 100.00		
SUBTOTAL of Receipts This Page (optional).....			70.00	
TOTAL This Period (last page this line number only).....				

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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NAME OF COMMITTEE (In Full)
LYNCH FOR CONGRESS 16

A. Full Name (Last, First, Middle Initial) Christine Spano			Date of Receipt M M / D D / Y Y Y Y Y 01 / 25 / 2016	
Mailing Address 12725 Lake Shore Blvd			Transaction ID : SA11AI.5557	
City	State	Zip Code	Amount of Each Receipt this Period 100.00	
Bratenahl	OH	44108	<input type="checkbox"/> Memo Item	
FEC ID number of contributing federal political committee.		C		
Name of Employer Retired		Occupation Retired		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 150.00		
B. Full Name (Last, First, Middle Initial) Laurin Standfield			Date of Receipt M M / D D / Y Y Y Y Y 02 / 18 / 2016	
Mailing Address Dewey Kiser Rd			Transaction ID : SA11AI.5816	
City	State	Zip Code	Amount of Each Receipt this Period 10.00	
Bessemer City	NC	28016	<input type="checkbox"/> Memo Item	
FEC ID number of contributing federal political committee.		C		
Name of Employer Walmart		Occupation Cashier		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 10.00		
C. Full Name (Last, First, Middle Initial) Russell Stanton			Date of Receipt M M / D D / Y Y Y Y Y 02 / 16 / 2016	
Mailing Address 11959 Kile Rd			Transaction ID : SA11AI.5659	
City	State	Zip Code	Amount of Each Receipt this Period 21.00	
Chardon	OH	44024	<input type="checkbox"/> Memo Item	
FEC ID number of contributing federal political committee.		C		
Name of Employer Retired		Occupation Retired		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 21.00		
SUBTOTAL of Receipts This Page (optional).....			131.00	
TOTAL This Period (last page this line number only).....				

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

LYNCH FOR CONGRESS 16

Full Name (Last, First, Middle Initial)

Bonnie Stein

Mailing Address 6849 Paula Dr

City

Middleburg Heights

State

OH

Zip Code

44130

FEC ID number of contributing
federal political committee.

C

Name of Employer

Best Efforts

Occupation

Dog Groomer

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

125.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		06		2016

Transaction ID : SA11AI.5748

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Patricia Stephens

Mailing Address 2800 Industry Rd

City

Rootstown

State

OH

Zip Code

44272

FEC ID number of contributing
federal political committee.

C

Name of Employer

Kent State University

Occupation

Administrative Secretary

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

25.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		07		2016

Transaction ID : SA11AI.5753

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

NATHALEE STONE

Mailing Address 18330 Shaw Rd

City

Auburn Twp

State

OH

Zip Code

44023

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

75.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		02		2016

Transaction ID : SA11AI.5594

Amount of Each Receipt this Period

25.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional).....**TOTAL** This Period (last page this line number only).....

75.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)
LYNCH FOR CONGRESS 16

A. Full Name (Last, First, Middle Initial) Diane Stover			Date of Receipt M M / D D / Y Y Y Y 02 / 05 / 2016	
Mailing Address 7965 Ironwood Cir			Transaction ID : SA11AI.5740	
City	State	Zip Code		
Parma	OH	44129		
FEC ID number of contributing federal political committee.			Amount of Each Receipt this Period 100.00	
Name of Employer NE Ohio Values Voters			<input type="checkbox"/> Memo Item	
Occupation President				
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			Election Cycle-to-Date 100.00	
B. Full Name (Last, First, Middle Initial) Kenneth Sundermeier			Date of Receipt M M / D D / Y Y Y Y 01 / 12 / 2016	
Mailing Address 5106 Wichita Ave			Transaction ID : SA11AI.5689	
City	State	Zip Code		
Cleveland	OH	44144		
FEC ID number of contributing federal political committee.			Amount of Each Receipt this Period 100.00	
Name of Employer Retired			<input type="checkbox"/> Memo Item	
Occupation Retired				
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			Election Cycle-to-Date 100.00	
C. Full Name (Last, First, Middle Initial) Elsie Tarczy			Date of Receipt M M / D D / Y Y Y Y 02 / 08 / 2016	
Mailing Address 1091 Sheerbrook Dr.			Transaction ID : SA11AI.5619	
City	State	Zip Code		
Chagrin Falls	OH	44022		
FEC ID number of contributing federal political committee.			Amount of Each Receipt this Period 40.00	
Name of Employer Retired			<input type="checkbox"/> Memo Item	
Occupation Retired				
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			Election Cycle-to-Date 140.00	
SUBTOTAL of Receipts This Page (optional).....			240.00	
TOTAL This Period (last page this line number only).....				

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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NAME OF COMMITTEE (In Full)
LYNCH FOR CONGRESS 16

A. Full Name (Last, First, Middle Initial) Carolyn Tewell		Date of Receipt M M / D D / Y Y Y Y 01 / 17 / 2016	
Mailing Address 8845 Birchbark Grv		Transaction ID : SA11AI.5697	
City Chagrin Falls	State OH	Zip Code 44023	Amount of Each Receipt this Period _____ 250.00
FEC ID number of contributing federal political committee. C _____		<input type="checkbox"/> Memo Item	
Name of Employer Tewell & Associates, inc	Occupation Treasurer		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 250.00		
B. Full Name (Last, First, Middle Initial) Carolyn Tewell		Date of Receipt M M / D D / Y Y Y Y 02 / 12 / 2016	
Mailing Address 8845 Birchbark Grv		Transaction ID : SA11AI.5791	
City Chagrin Falls	State OH	Zip Code 44023	Amount of Each Receipt this Period _____ 25.00
FEC ID number of contributing federal political committee. C _____		<input type="checkbox"/> Memo Item	
Name of Employer Tewell & Associates, inc	Occupation Treasurer		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 275.00		
C. Full Name (Last, First, Middle Initial) Charles Thomasen		Date of Receipt M M / D D / Y Y Y Y 02 / 11 / 2016	
Mailing Address 7221 Lancaster Ct		Transaction ID : SA11AI.5782	
City Painesville	State OH	Zip Code 44077	Amount of Each Receipt this Period _____ 40.00
FEC ID number of contributing federal political committee. C _____		<input type="checkbox"/> Memo Item	
Name of Employer Retired	Occupation Retired		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 40.00		
SUBTOTAL of Receipts This Page (optional).....		_____ 315.00	
TOTAL This Period (last page this line number only).....		_____	

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
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(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

LYNCH FOR CONGRESS 16

Full Name (Last, First, Middle Initial)

A. Alyce Turner

Mailing Address 7970 Center St

City

Mentor

State

OH

Zip Code

44060

FEC ID number of contributing
federal political committee.

C

Name of Employer

Best Efforts

Occupation

Best Efforts

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

50.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		01		2016

Transaction ID : SA11AI.5718

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Jerry Vencel

Mailing Address 9105 Bramley Dr

City

Independence

State

OH

Zip Code

44131

FEC ID number of contributing
federal political committee.

C

Name of Employer

Corrlett Movers

Occupation

Furniture Mover

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01		08		2016

Transaction ID : SA11AI.5534

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Joseph Ventimiglia

Mailing Address 66 Windward Way

City

Chagrin Falls

State

OH

Zip Code

44023

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self

Occupation

Sales

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		08		2016

Transaction ID : SA11AI.5757

Amount of Each Receipt this Period

100.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional).....**TOTAL** This Period (last page this line number only).....

1150.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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NAME OF COMMITTEE (In Full)
LYNCH FOR CONGRESS 16

A. Full Name (Last, First, Middle Initial) LINDA VENTIMIGLIA		Date of Receipt M M / D D / Y Y Y Y 02 / 16 / 2016	
Mailing Address 13412 SHADY LANE		Transaction ID : SA11AI.5655	
City CHESTERLAND	State OH	Zip Code 44026	Amount of Each Receipt this Period _____ 75.00
FEC ID number of contributing federal political committee. C _____		<input type="checkbox"/> Memo Item	
Name of Employer Ventco	Occupation Self Employed		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 175.00		
B. Full Name (Last, First, Middle Initial) Ed Vincent		Date of Receipt M M / D D / Y Y Y Y 02 / 02 / 2016	
Mailing Address 1510 Suffield Oaks Ln		Transaction ID : SA11AI.5721	
City Suffield Township	State OH	Zip Code 44260	Amount of Each Receipt this Period _____ 50.00
FEC ID number of contributing federal political committee. C _____		<input type="checkbox"/> Memo Item	
Name of Employer Retired	Occupation Retired		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 50.00		
C. Full Name (Last, First, Middle Initial) John L Volanski		Date of Receipt M M / D D / Y Y Y Y 02 / 12 / 2016	
Mailing Address 55 Wilmington Drive		Transaction ID : SA11AI.5645	
City Painseville	State OH	Zip Code 44077	Amount of Each Receipt this Period _____ 50.00
FEC ID number of contributing federal political committee. C _____		<input type="checkbox"/> Memo Item	
Name of Employer Retired	Occupation Retired		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 150.00		
SUBTOTAL of Receipts This Page (optional).....		_____ 175.00	
TOTAL This Period (last page this line number only).....		_____	

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

LYNCH FOR CONGRESS 16

Full Name (Last, First, Middle Initial)

Joseph Walkos

Mailing Address PO Box 337

City

Burton

State

OH

Zip Code

44021

FEC ID number of contributing
federal political committee.

C

Name of Employer

Pyrotek

Occupation

Supply Chain Manager

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

50.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		12		2016

Transaction ID : SA11AI.5787

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

MADELINE WALKOS

Mailing Address 9259 WILLSON DR

City

CHAGRIN FALLS

State

OH

Zip Code

44023

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

50.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01		15		2016

Transaction ID : SA11AI.5540

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Mary Walkos

Mailing Address 3167 Warren Burton Rd

City

Southington

State

OH

Zip Code

44470

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

25.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		16		2016

Transaction ID : SA11AI.5657

Amount of Each Receipt this Period

25.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional).....**TOTAL** This Period (last page this line number only).....

125.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)
LYNCH FOR CONGRESS 16

A. Full Name (Last, First, Middle Initial) James Walsh			Date of Receipt M M / D D / Y Y Y Y 02 / 11 / 2016	
Mailing Address 1705 Duffton Ln			Transaction ID : SA11AI.5785	
City	State	Zip Code	Amount of Each Receipt this Period 50.00	
Painesville	OH	44077	<input type="checkbox"/> Memo Item	
FEC ID number of contributing federal political committee.		C		
Name of Employer Babcock & Wilcox		Occupation Safety Manager		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 50.00		
B. Full Name (Last, First, Middle Initial) Elizabeth Wanner			Date of Receipt M M / D D / Y Y Y Y 02 / 24 / 2016	
Mailing Address 347 Sylvia Dr			Transaction ID : SA11AI.5684	
City	State	Zip Code	Amount of Each Receipt this Period 500.00	
Chardon	OH	44024	<input type="checkbox"/> Memo Item	
FEC ID number of contributing federal political committee.		C		
Name of Employer Retired		Occupation Retired		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 500.00		
C. Full Name (Last, First, Middle Initial) Thomas Welch			Date of Receipt M M / D D / Y Y Y Y 02 / 11 / 2016	
Mailing Address 8373 Old Forest St NW			Transaction ID : SA11AI.5783	
City	State	Zip Code	Amount of Each Receipt this Period 100.00	
Massillon	OH	44646	<input type="checkbox"/> Memo Item	
FEC ID number of contributing federal political committee.		C		
Name of Employer East Mfg		Occupation Management		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 200.00		
SUBTOTAL of Receipts This Page (optional).....			650.00	
TOTAL This Period (last page this line number only).....				

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)
LYNCH FOR CONGRESS 16

A. Full Name (Last, First, Middle Initial) Diane Winans			Date of Receipt M M / D D / Y Y Y Y 02 / 10 / 2016	
Mailing Address 15945 Arbor Trail			Transaction ID : SA11AI.5633	
City Newbury	State OH	Zip Code 44065	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item		
Name of Employer Retired		Occupation Retired		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 250.00		
B. Full Name (Last, First, Middle Initial) Philip Wintering			Date of Receipt M M / D D / Y Y Y Y 01 / 25 / 2016	
Mailing Address 755 Deep Woods Dr			Transaction ID : SA11AI.5568	
City Aurora	State OH	Zip Code 44202	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item		
Name of Employer Best Efforts		Occupation Best Efforts		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 50.00		
C. Full Name (Last, First, Middle Initial) LINDA WISER			Date of Receipt M M / D D / Y Y Y Y 02 / 24 / 2016	
Mailing Address 733 WESTWOOD DR			Transaction ID : SA11AI.5687	
City PAINESVILLE	State OH	Zip Code 44077	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item		
Name of Employer Retired		Occupation Retired		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 100.00		
SUBTOTAL of Receipts This Page (optional).....			250.00	
TOTAL This Period (last page this line number only).....				

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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NAME OF COMMITTEE (In Full)
LYNCH FOR CONGRESS 16

A. Full Name (Last, First, Middle Initial) John Wolfe		Date of Receipt M M / D D / Y Y Y Y 02 / 08 / 2016	
Mailing Address 24300 Chagrin Blvd		Transaction ID : SA11AI.5610	
City Beachwood	State OH	Zip Code 44122	Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item	
Name of Employer Self	Occupation DDS		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 100.00		
B. Full Name (Last, First, Middle Initial) Richard Woolf		Date of Receipt M M / D D / Y Y Y Y 01 / 04 / 2016	
Mailing Address 18407 Munn Rd		Transaction ID : SA11AI.5524	
City Chagrin Falls	State OH	Zip Code 44023	Amount of Each Receipt this Period 25.00
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item	
Name of Employer Lake Health	Occupation RN		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 25.00		
C. Full Name (Last, First, Middle Initial) Antoinette Yanulaitis		Date of Receipt M M / D D / Y Y Y Y 02 / 02 / 2016	
Mailing Address 164 Lakeview Lane		Transaction ID : SA11AI.5587	
City Hiram	State OH	Zip Code 44234	Amount of Each Receipt this Period 25.00
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item	
Name of Employer Retired	Occupation Retired		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 25.00		
SUBTOTAL of Receipts This Page (optional).....		150.00	
TOTAL This Period (last page this line number only).....			

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

LYNCH FOR CONGRESS 16

Full Name (Last, First, Middle Initial)

Robert Zames

Mailing Address 10556 Clearlake Dr

City

Painesville

State

OH

Zip Code

44077

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self Employed

Occupation

Real Estate Broker

Receipt For: 2016



Primary



General



Other (specify)

Election Cycle-to-Date

25.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		05		2016

Transaction ID : SA11Al.5732

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:



Primary



General



Other (specify)

Election Cycle-to-Date

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y

Amount of Each Receipt this Period

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:



Primary



General



Other (specify)

Election Cycle-to-Date

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y

Amount of Each Receipt this Period

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

25.00

30220.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 76 OF 92

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input checked="" type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)

LYNCH FOR CONGRESS 16

Full Name (Last, First, Middle Initial)

MATT LYNCH

Mailing Address 17392 SUGAR HILL TRAIL

City

CHAGRIN FALLS

State

OH

Zip Code

44023

FEC ID number of contributing
federal political committee.**C** H4OH14110

Name of Employer

Lynch & Lynch Co LPA

Occupation

Attorney

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2219.50

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	24	/	2016

Transaction ID : SA13A.5825

Amount of Each Receipt this Period

200.00

☐ Memo Item

Cover deposit for event at Hyde Park

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.**C**

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
	/		/	

Amount of Each Receipt this Period

☐ Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.**C**

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
	/		/	

Amount of Each Receipt this Period

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional).....**TOTAL** This Period (last page this line number only).....

200.00

200.00

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 77 OF 92

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

LYNCH FOR CONGRESS 16

Full Name (Last, First, Middle Initial)

A. Accurate Append, Inc.Mailing Address 1511 3rd Ave
Suite 621City State Zip Code
Seattle WA 98101Purpose of Disbursement
WEB SERVICES - EMAIL

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		04		2016

Amount of Each Disbursement this Period

215.92

☐ Memo Item

Transaction ID : SB17.5868

B. AMAZON.COMMailing Address 1200 12TH AVE S
SUITE 1200City State Zip Code
SEATTLE WA 98144-2734Purpose of Disbursement
LITERATURE DROP MATERIALS

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		04		2016

Amount of Each Disbursement this Period

10.99

☐ Memo Item

Transaction ID : SB17.5874

C. AMAZON.COMMailing Address 1200 12TH AVE S
SUITE 1200City State Zip Code
SEATTLE WA 98144-2734Purpose of Disbursement
TELEPHONE HEADSETS

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		07		2016

Amount of Each Disbursement this Period

53.30

☐ Memo Item

Transaction ID : SB17.5875

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

280.21

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 78 OF 92

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

LYNCH FOR CONGRESS 16

Full Name (Last, First, Middle Initial)

A. AMAZON.COMMailing Address 1200 12TH AVE S
SUITE 1200

City SEATTLE State WA Zip Code 98144-2734

Purpose of Disbursement
LITERATURE DROP BAGS

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: 2016
☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		08		2016

Amount of Each Disbursement this Period

24.55

☐ Memo Item

Transaction ID : SB17.5876

B. Melissa Bohanan

Mailing Address 2916 Bohanan Rd

City Morristown State TN Zip Code 37813

Purpose of Disbursement
SOCIAL MEDIA CONSULTANT

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: 2016
☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		12		2016

Amount of Each Disbursement this Period

500.00

☐ Memo Item

Transaction ID : SB17.5845

c. Melissa Bohanan

Mailing Address 2916 Bohanan Rd

City Morristown State TN Zip Code 37813

Purpose of Disbursement
SOCIAL MEDIA CONSULTANT

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: 2016
☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		05		2016

Amount of Each Disbursement this Period

500.00

☐ Memo Item

Transaction ID : SB17.5877

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

1024.55

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 79 OF 92

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

LYNCH FOR CONGRESS 16

Full Name (Last, First, Middle Initial)

A. Cybersource/Authorize.net

Mailing Address 808 E. Utah Valley Dr

City	State	Zip Code
American Fork	UT	84003

Purpose of Disbursement
MERCHANT FEES

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		05		2016

Amount of Each Disbursement this Period

25.00

☐ Memo Item

Transaction ID : SB17.5872

B. Cybersource/Authorize.net

Mailing Address 808 E. Utah Valley Dr

City	State	Zip Code
American Fork	UT	84003

Purpose of Disbursement
MERCHANT FEES - CARD PROCESSING

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		29		2016

Amount of Each Disbursement this Period

62.67

☐ Memo Item

Transaction ID : SB17.5878

C. Cybersource/Authorize.net

Mailing Address 808 E. Utah Valley Dr

City	State	Zip Code
American Fork	UT	84003

Purpose of Disbursement
MERCHANT FEES

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		02		2016

Amount of Each Disbursement this Period

25.00

☐ Memo Item

Transaction ID : SB17.5873

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

112.67

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 80 OF 92

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

LYNCH FOR CONGRESS 16

Full Name (Last, First, Middle Initial)

A. Excel Printing

Mailing Address 17800 Chillicothe Rd.

City	State	Zip Code
Chagrin Falls	OH	44023

Purpose of Disbursement
Printing Services

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		22		2016

Amount of Each Disbursement this Period

165.38

☐ Memo Item

Transaction ID : SB17.5852

B. Excel Printing

Mailing Address 17800 Chillicothe Rd.

City	State	Zip Code
Chagrin Falls	OH	44023

Purpose of Disbursement
Printing Services

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		22		2016

Amount of Each Disbursement this Period

144.12

☐ Memo Item

Transaction ID : SB17.5853

c. Four Tier Strategies, LLC

Mailing Address 273 Roslindale Ave

City	State	Zip Code
Roslindale	MA	02131

Purpose of Disbursement
Consulting Fees

Candidate Name

LYNCH FOR CONGRESS 16

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State: OH District: 14

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		19		2016

Amount of Each Disbursement this Period

1800.00

☐ Memo Item

Transaction ID : SB17.5832

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

2109.50

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 81 OF 92

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

LYNCH FOR CONGRESS 16

Full Name (Last, First, Middle Initial)

A. Four Tier Strategies, LLC

Mailing Address 273 Roslindale Ave

City	State	Zip Code
Roslindale	MA	02131

Purpose of Disbursement
Advertising

Candidate Name

LYNCH FOR CONGRESS 16

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State: OH

District: 14

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		26		2016

Amount of Each Disbursement this Period

1259.63

☐ Memo Item

Transaction ID : SB17.5833

B. Four Tier Strategies, LLC

Mailing Address 273 Roslindale Ave

City	State	Zip Code
Roslindale	MA	02131

Purpose of Disbursement
Consulting Fees

Candidate Name

LYNCH FOR CONGRESS 16

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State: OH

District: 14

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		16		2016

Amount of Each Disbursement this Period

1800.00

☐ Memo Item

Transaction ID : SB17.5831

c. Gravis MarketingMailing Address 910 Belle Ave
Ste 1180

City	State	Zip Code
Winter Springs	FL	32708

Purpose of Disbursement
MARKETING

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		03		2016

Amount of Each Disbursement this Period

3500.00

☐ Memo Item

Transaction ID : SB17.5870

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

6559.63

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 82 OF 92

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

LYNCH FOR CONGRESS 16

Full Name (Last, First, Middle Initial)

A. Gravis MarketingMailing Address 910 Belle Ave
Ste 1180

City Winter Springs State FL Zip Code 32708

Purpose of Disbursement
MARKETING

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		17		2016

Amount of Each Disbursement this Period

3500.00

☐ Memo Item

Transaction ID : SB17.5871

B. NATHAN MILLER

Mailing Address 15564 HEMLOCK POINT ROAD

City CHAGRIN FALLS State OH Zip Code 44022

Purpose of Disbursement
Marketing

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		08		2016

Amount of Each Disbursement this Period

200.00

☐ Memo Item

Transaction ID : SB17.5847

C. NATHAN MILLER

Mailing Address 15564 HEMLOCK POINT ROAD

City CHAGRIN FALLS State OH Zip Code 44022

Purpose of Disbursement
Marketing

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		19		2016

Amount of Each Disbursement this Period

240.00

☐ Memo Item

Transaction ID : SB17.5849

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

3940.00

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

LYNCH FOR CONGRESS 16

Full Name (Last, First, Middle Initial)

A. NATHAN MILLER

Mailing Address 15564 HEMLOCK POINT ROAD

City	State	Zip Code
CHAGRIN FALLS	OH	44022

Purpose of Disbursement
Marketing

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		22		2016

Amount of Each Disbursement this Period

200.00

☐ Memo Item

Transaction ID : SB17.5851

B. Minuteman Press of AkronMailing Address 3571 Brookwall Drive
Suite C

City	State	Zip Code
Akron	OH	44333

Purpose of Disbursement
PRINTING SERVICES

Candidate Name

LYNCH FOR CONGRESS 16

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State: OH District: 14

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		19		2016

Amount of Each Disbursement this Period

1939.18

☐ Memo Item

Transaction ID : SB17.5864

C. Minuteman Press of AkronMailing Address 3571 Brookwall Drive
Suite C

City	State	Zip Code
Akron	OH	44333

Purpose of Disbursement
Postage

Candidate Name

LYNCH FOR CONGRESS 16

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State: OH District: 14

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		20		2016

Amount of Each Disbursement this Period

852.75

☐ Memo Item

Transaction ID : SB17.5850

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

2991.93

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 84 OF 92

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

LYNCH FOR CONGRESS 16

Full Name (Last, First, Middle Initial)

A. NationbuilderMailing Address 520 S. Grand Ave
Second Floor

City Los Angeles State CA Zip Code 90071

Purpose of Disbursement
WEB SERVICES - GENERAL

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	D D	Y Y Y Y
01	19	2016

Amount of Each Disbursement this Period

999.00

☐ Memo Item

Transaction ID : SB17.5834

B. NationbuilderMailing Address 520 S. Grand Ave
Second Floor

City Los Angeles State CA Zip Code 90071

Purpose of Disbursement
WEB SERVICES - GENERAL

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	D D	Y Y Y Y
02	17	2016

Amount of Each Disbursement this Period

999.00

☐ Memo Item

Transaction ID : SB17.5835

C. OFFICEMAX

Mailing Address 33605 AURORA RD

City SOLON State OH Zip Code 44139

Purpose of Disbursement
PRINTING SERVICES

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	D D	Y Y Y Y
01	14	2016

Amount of Each Disbursement this Period

227.51

☐ Memo Item

Transaction ID : SB17.5848

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

2225.51

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

LYNCH FOR CONGRESS 16

Full Name (Last, First, Middle Initial)

A. Ohio Christian Alliance

Mailing Address PO BOX 3076

City	State	Zip Code
AKRON	OH	44309

Purpose of Disbursement
Table at Freedom Banquet

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		02		2016

Amount of Each Disbursement this Period

500.00

☐ Memo Item

Transaction ID : SB17.5859

B. Rainmakers

Mailing Address PO BOX 1082

City	State	Zip Code
SPRINGFIELD	VA	22151

Purpose of Disbursement
CONSULTING SERVICES

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		01		2016

Amount of Each Disbursement this Period

61.13

☐ Memo Item

Transaction ID : SB17.5857

c. Realize FAC

Mailing Address PO BOX 77

City	State	Zip Code
WAYLAND	OH	44285

Purpose of Disbursement
Exhibition Booth Fees

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		29		2016

Amount of Each Disbursement this Period

100.00

☐ Memo Item

Transaction ID : SB17.5855

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

661.13

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

LYNCH FOR CONGRESS 16

Full Name (Last, First, Middle Initial)

A. Rock Creek Operations, Inc.

Mailing Address 2716 Blaine Drive

City	State	Zip Code
Chevy Chase	MD	20815

Purpose of Disbursement
COMPLIANCE SERVICES

Candidate Name

LYNCH FOR CONGRESS 16

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State: OH

District: 14

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		19		2016

Amount of Each Disbursement this Period

3250.00

☐ Memo Item

Transaction ID : SB17.5880

Full Name (Last, First, Middle Initial)

B. TRZ Business Services, Inc.

Mailing Address P.O. Box 6211

City	State	Zip Code
Akron	OH	44312

Purpose of Disbursement
CONSULTING SERVICES - DEC 2015

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		08		2016

Amount of Each Disbursement this Period

3000.00

☐ Memo Item

Transaction ID : SB17.5840

Full Name (Last, First, Middle Initial)

C. TRZ Business Services, Inc.

Mailing Address P.O. Box 6211

City	State	Zip Code
Akron	OH	44312

Purpose of Disbursement
Marketing

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		08		2016

Amount of Each Disbursement this Period

1449.65

☐ Memo Item

Transaction ID : SB17.5841

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

7699.65

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

LYNCH FOR CONGRESS 16

Full Name (Last, First, Middle Initial)

A. TRZ Business Services, Inc.

Mailing Address P.O. Box 6211

City	State	Zip Code
Akron	OH	44312

Purpose of Disbursement
ADVERTISING - TELEPHONE

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2016

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y
02 / 04 / 2016

Amount of Each Disbursement this Period

7256.81

☐ Memo Item

Transaction ID : SB17.5843

B. USPS

Mailing Address CHILLICOTHE RD

City	State	Zip Code
CHAGRIN FALLS	OH	44022

Purpose of Disbursement
POSTAGE

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2016

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y
01 / 14 / 2016

Amount of Each Disbursement this Period

294.02

☐ Memo Item

Transaction ID : SB17.5844

c. VervemailMailing Address 5348 VEGAS DRIVE
SUITE 289

City	State	Zip Code
LAS VEGAS	NV	89108

Purpose of Disbursement
WEB SERVICES - EMAIL

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2016

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y
01 / 05 / 2016

Amount of Each Disbursement this Period

1663.83

☐ Memo Item

Transaction ID : SB17.5866

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

9214.66

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

LYNCH FOR CONGRESS 16

Full Name (Last, First, Middle Initial)

A. VervemailMailing Address 5348 VEGAS DRIVE
SUITE 289

City LAS VEGAS State NV Zip Code 89108

Purpose of Disbursement
WEB SERVICES - EMAIL

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		05		2016

Amount of Each Disbursement this Period

399.60

☐ Memo Item

Transaction ID : SB17.5867

B. VistaPrint

Mailing Address 275 Wyman Street

City Waltham State MA Zip Code 02451

Purpose of Disbursement
PRINTING SERVICES

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		27		2016

Amount of Each Disbursement this Period

109.97

☐ Memo Item

Transaction ID : SB17.5863

C. Western Reserve Republican Women's Club

Mailing Address 8337 TULIP LANE

City CHAGRIN FALLS State OH Zip Code 44023

Purpose of Disbursement
Two Luncheon Tickets

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		17		2016

Amount of Each Disbursement this Period

50.00

☐ Memo Item

Transaction ID : SB17.5861

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

559.57

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 89 OF 92

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

LYNCH FOR CONGRESS 16

Full Name (Last, First, Middle Initial)

A. STACY WESTERVELT

Mailing Address 7915 SCOTLAND DR

City	State	Zip Code
CHAGRIN FALLS	OH	44023

Purpose of Disbursement
Marketing

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		04		2016

Amount of Each Disbursement this Period

100.00

☐ Memo Item

Transaction ID : SB17.5839

B. STACY WESTERVELT

Mailing Address 7915 SCOTLAND DR

City	State	Zip Code
CHAGRIN FALLS	OH	44023

Purpose of Disbursement
Graphic Design

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		20		2016

Amount of Each Disbursement this Period

70.00

☐ Memo Item

Transaction ID : SB17.5838

C. STACY WESTERVELT

Mailing Address 7915 SCOTLAND DR

City	State	Zip Code
CHAGRIN FALLS	OH	44023

Purpose of Disbursement
Graphic Design

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		22		2016

Amount of Each Disbursement this Period

170.00

☐ Memo Item

Transaction ID : SB17.5837

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

340.00

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 90 OF 92

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

LYNCH FOR CONGRESS 16

Full Name (Last, First, Middle Initial)

A. STACY WESTERVELT

Mailing Address 7915 SCOTLAND DR

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		16		2016

City	State	Zip Code
CHAGRIN FALLS	OH	44023

Amount of Each Disbursement this Period

Purpose of Disbursement
Graphic Design

90.00

Candidate Name

Category/
Type☐ Memo Item

Transaction ID : SB17.5836

Office Sought:	House	Disbursement For: 2016
	Senate	
	President	
		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

State: District:

Full Name (Last, First, Middle Initial)

B.

Mailing Address

Date of Disbursement

M M	/	D D	/	Y Y Y Y

City	State	Zip Code

Amount of Each Disbursement this Period

Purpose of Disbursement

--

Candidate Name

Category/
Type☐ Memo Item

Office Sought:	House	Disbursement For:
	Senate	
	President	
		<input type="checkbox"/> Primary <input type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

State: District:

Full Name (Last, First, Middle Initial)

C.

Mailing Address

Date of Disbursement

M M	/	D D	/	Y Y Y Y

City	State	Zip Code

Amount of Each Disbursement this Period

Purpose of Disbursement

--

Candidate Name

Category/
Type☐ Memo Item

Office Sought:	House	Disbursement For:
	Senate	
	President	
		<input type="checkbox"/> Primary <input type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

State: District:

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

90.00
37809.01

SCHEDULE C (FEC Form 3)
LOANS

PAGE 91 OF 92

Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4244

LYNCH FOR CONGRESS 16

LOAN SOURCE Full Name (Last, First, Middle Initial) **PERSONAL FUNDS** ☐ Memo Item

MATT LYNCH

Election: 2016

☒ Primary☐ General☐ Other (specify) ▼

Mailing Address

17392 SUGAR HILL TRAIL

City

State

ZIP Code

CHAGRIN FALLS

OH

44023

Original Amount of Loan

219.50

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

219.50

TERMS

Date Incurred

M / M / Y
07 / 06 / 2015

Date Due

M / M / Y
/ / N/A

Interest Rate

0.00

% (apr)

Secured:

☐ Yes☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ►

219.50

TOTALS This Period (last page in this line only)..... ►

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANS

PAGE 92 OF 92

Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.5825

LYNCH FOR CONGRESS 16

LOAN SOURCE Full Name (Last, First, Middle Initial) **PERSONAL FUNDS** ☐ Memo Item

MATT LYNCH

Election: 2016

☒ Primary☐ General☐ Other (specify) ▼Mailing Address
17392 SUGAR HILL TRAIL

City	State	ZIP Code
CHAGRIN FALLS	OH	44023

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
<input type="text" value="200.00"/>	<input type="text" value="0.00"/>	<input type="text" value="200.00"/>

TERMS

Date Incurred

 / /

Date Due

 / /

Interest Rate

 % (apr)

Secured:

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text" value=""/>
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text" value=""/>
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text" value=""/>
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text" value=""/>

SUBTOTALS This Period This Page (optional)..... ►**TOTALS** This Period (last page in this line only)..... ►

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.